



**“KNOWLEDGE REGARDING HEALTHY LIFE STYLE AMONG ADOLESCENTS
STUDYING IN SELECTED COLLEGES AT MANGALURU”**

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ABSTRACT

Introduction: The lifestyle of the Adolescents is a major issue in the today's society and it differs from person to person. An adolescent phase is commonly thought of as a period of optimum health. An unhealthy lifestyle can contribute to the development of risk factors of non communicable diseases (NCDs) Helping adolescents to establish healthy lifestyles and avoid developing health risk behaviors is crucial and should be started before these behaviors are firmly established. **Objectives:** To assess the level of knowledge regarding healthy lifestyle among adolescents, and to find the association of knowledge score of adolescents on healthy lifestyle with selected demographic variables. **Methods:** A descriptive research design was adopted for this study. The study sample consists of 100 adolescents selected through simple random sampling technique based on inclusion criteria and exclusion criteria, from selected colleges at Mangaluru. A structured knowledge questionnaire was administered to collect data and the collected data was analyzed using descriptive and inferential statistics. **Results:** The result showed that the overall knowledge was average 38 % among subjects regarding healthy lifestyles. There was no significant association between the level knowledge and selected demographic variables except source of information. **Conclusion:** The adolescent students had only average knowledge regarding healthy life style. The study recommends the need for curriculum-based health education regarding healthy lifestyle practices into their daily lives.

KEYWORDS: Adolescents, Healthy Lifestyle.

INTRODUCTION

Adolescence is the second decade of life, it is a period in which an individual undergoes major physical and psychological changes.^[1,2] Adolescents are on the whole, healthy individuals the disease level low during this age period, but there is heightened concern about the body.^[1-3] Most of the health problem and the more common illnesses are in some way related to the body changes of puberty.^[4] The health maintenance behavior refers to any activity or behavior undertaken primarily for the purpose of protecting or assuring current level of health, as observed by the individual.^[5,6] Every individual overlook their body's basic needs^[7,8] example proper nutrition, sleep, rest and exercise.^[1,9] Further, health maintenance requires preventive measures at all three levels such as primary, secondary, tertiary prevention.^[1,10] It has been also observed that so many people use such health activities, which are perceived by themselves and found healthy.^[11] People are following some types of techniques such as nutrition, exercise, sleep etc.^[12]

Healthy lifestyle has been operationally defined as “a way of life that promotes and protects health and well being”^[1,13] This would include practices that promote health.^[14,15] such as health and nutrition, regular and adequate physical activity and leisure, avoidance of substances that can be abused as tobacco, alcohol and other addicting substances adequate stress management and relaxation;^[16,17] and practices that offer protection from health risk.^[18] If adolescents adopt healthy behavior that contribute to a healthy lifestyle.^[19] A study by Rutuja M Phulambrikar et al reported, Out of 266 students only 12.78% eat fruits daily. Daily junk food consumption was seen in 24.81% students and more than half (57.14%) tend to skip meals. Out of 92.10% students who perform physical activity in their leisure time, only 31.83% exercise adequately. It is important to emphasize on the value of healthy lifestyles in medical colleges.^[20] So assessing their health behavior in terms of healthy lifestyle is one of the major responsibility of a health professionals. With this background the present study

was carried out to assess the knowledge regarding healthy life style among adolescents.

MATERIALS AND METHODS

A quantitative approach with descriptive research design was adopted for this study. The study sample consists of 100 adolescents selected through simple random sampling technique based on inclusion criteria and exclusion criteria from selected colleges at Mangaluru. After obtaining ethical clearance, the formal written assent was obtained from adolescents and informed consent were taken from parent's subjects. A structured knowledge questionnaire was administered to collect data and the collected data was analyzed using descriptive and inferential statistics.

RESULTS AND DISCUSSION

Table 1 depicts the level of knowledge regarding healthy lifestyle, Out of these 38% of the adolescents had average knowledge, 37% had good knowledge where as 17% had excellent knowledge and only 8% of sample had poor knowledge regarding healthy lifestyle .Findings of the study present study are contradictory with another study conducted in Karachi assess the knowledge and practice among medical non-medical students. Where the result showed that there is good knowledge regarding healthy life style among medical non medical students.^[20]

The present study results showed that out of 100 adolescents highest percentage 47% of them were belongs to 16yrs, most of them 58% were females, majority 53% from 11puc class, highest percentages of 29% were from joint family, nearly half 30% of them were presently residing with their relatives. Highest 37% parent's occupation were private job.

Table 2 Sample characteristics shows that there was a significant association between the source of information and demographic variables. Findings of the present study are consistent with another study conducted in Yenepoya medical college to assess the level of knowledge, attitude and practice regarding healthy life style among adolescents where the results showed that there is significant association between the source of information and demographic variables.^[24]

Table 1: Level of knowledge regarding healthy life style n = 100.

Knowledge score	Level of knowledge	f	%
27 and above	Excellent	17	17.0
22-26	Good	37	37.0
16-21	Average	38	38.0
< 16	Poor	8	8.0

The data in table 1 depicts the level of knowledge regarding healthy lifestyle.

Table 2: Sample characteristics n = 100.

Sl. No.	Demographic variables	f	%
1.	Age		
	15yrs	29	29.0
	16yrs	47	47.0
	17yrs	24	24.0
2.	Gender		
	Male	42	42.0
	Female	58	58.0
3.	Class		
	I puc	47	47.0
	II puc	53	53.0
4.	Type of family		
	Nuclear	24	24.0
	Joint	29	29.0
	Extended	28	28.0
	Single parent	19	19.0
5.	Presently residing		
	With family	27	27.0
	With relatives	30	30.0
	Hostel	24	24.0
	Pg	19	19.0
6.	Residential area		
	Rural	48	48.0
	Urban	52	52.0
7.	Parent occupation		
	Government job	3	3.0
	Private job	37	37.0
	Business	35	35.0
	Daily wages	25	25.0
8.	Source of information		
	Internet	10	10.0
	Parents	23	23.0
	Siblings	24	24.0
	Teachers	19	19.0
	Books	14	14.0
	News paper	10	10.0
9.	Income		
	<4000	12	12.0
	4001-5000	32	32.0
	5001-8000	33	33.0
	Greater than 8000	23	23.0
10.	If information received		
	Yes	65	65.0
	No	35	35.0

The data presented in table 2 depicts the distribution of adolescent students according to demographic variables.

CONCLUSION

knowledge regarding healthy lifestyle among adolescents was average .This may increase the risk for getting chronic non-communicable diseases in a later age such as coronary heart disease, diabetes, hypertension, and cancer. These diseases have become the main public health problems in most of the countries. Health education among both school children and their parents should emphasize the importance of following healthy

lifestyle. Regular interaction between parents, adolescents, college authorities, and health personnel is required to emphasize the connection between health and healthy lifestyle practices.

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REFERENCES

1. Park K. Park's text book of preventive and social medicine. 22nded. Jabalpur: Banarsidas Bhanot Publishers, 2013; 20.
2. Adam DV. American Heritage Dictionary, 2017 Sep 13; 5(154).
3. Mulye TP, Park MJ, Nelson CD, Adam SH, Irwin CE, Brindis CD. Trends in adolescent and young adult thinness in the United States. *Journal of Adolescent Health*, 2009 Jul 31; 45(1): 8-24.
4. Dey S. 25% of Indians may die of lifestyle diseases before they are 70. [online]. Available from: URL: <https://timesofindia.indiatimes.com/india/25-of-Indians-may-die-of-lifestyle-diseases-before-they-are-70-Study/articleshow/48460601.cms>.
5. Joseph DV. Nelson life changed life style health and well-being. [online], 2016. Available from: <http://www.deccanchronic.com/27121>.
6. Joseph N. years of change: Life changed life style diseases took over. *Deccan Chronicle*. [online]. Available from: URL: <http://www.deccanchronicle.com/lifestyle/health-and-wellbeing/271216/2016-year-of-change-life-changed-lifestyle-diseases-took-over.html>, 2016.
7. Dongwang, Xiao-Huixing, Xianbowu. Healthy life style of university students in China and influential factors, 2013; 412950: 10.1155.
8. Call K T, Reidel A, Hein KL, Vonnie PA, Kipke M. Adolescents health and well-being in the twenty first century. *Journal of Research on Adolescence*, 2002; 12(1): 69-98.
9. Sumaghkar B. Karnataka-Health statistics. census. [online], 2011. Available from: URL: <http://www.indushealthplus.com/karnataka-health-statistics.html>.
10. Martinedallinga J, Mennes M, Alpay L, Bijwaard H, De La Faille M, Deutekom. Appuse, physical activity and healthy lifestyle: Across sectional study. *BMC Public Health*, 2015; 15: 833.
11. Banjade B, Naik VA, Narasanavar AB. Body weight perception by college going adolescents of North Karnataka, India. Across sectional study.
12. Junxu, Qiu J, Jiechen, Zou L, Feng L, Lu Y, Wei Q, Zhang J. Life style and health related quality of life. *Biomed Central*, 2012; 12: 330.
13. Dongwang, Xiao-Huixing, Xian bowu. Healthy life style of University students in China and influential factors, 2013; 412950: 10.1155.
14. Musaiger AO, Mariyamai- Mannai, Tayyem R, Al-Lalla O, Ali EYA, Faizakalam, Benhamed MM, Saghir S, Halahleeh I, Djoudi Z, Manelchirane. Perceived barrier to healthy eating and physical activity among adolescents, 2015 Jan 2; 84: 2224-8.
15. Larsson SC, Åkesson A, Wolk A. Primary prevention of stroke by a healthy life style in a high-risk group. *Neurology*, 2015 Jun 2; 84(22): 2224-8.
16. Chiuve SE, Mc Cullough ML, Sacks FM, Rimm EB. Healthy life style factors in the primary prevention of coronary heart diseases among men. [online]. Available from: URL: <http://www.circulationaha.org> July 11, 2006; 114: 160-167.
17. Shukla B, Kaur MA. Study to assess the life style practices of overweight and normal weight children, India, 2013. 828003012013003. issn 1839-6518.
18. Gamage AU, Jayawardana PL. Non-communicable disease and practice related to healthy life style. *BMC*, 2017 Jul 21; 2: 18-64.
19. Sajwani RA, Shoukat S, Razza R. Knowledge and practice of healthy life style and dietary habits among medical and non-medical students. *Journal of Pakistan Medical Association*, 2009; 59(9): 650-5.
20. Phulambrikar RM, Phalke DB, Kharde AL, Phalke VD. Study of lifestyle practices of students of rural medical college, Loni. *International Journal of Medical Science and Public Health*, 2014 Sep 1; 3(9): 1079-81.
21. Divakaran B, Muttapillymyalil J, Sreedharan J, Shalini K. Lifestyle risk factors of non-communicable diseases: awareness among school children. *Indian J Cancer*, 2010 Jul; 47 Suppl 1: 9-13.
22. Sundar JS, Adaikalam JMS, Parameshwari S, Valarmarathi S, Kalpana S, Shantharam D. Prevalence and determinants of hypertension among urban school children in the age group of 13- 17 years in Chennai, Tamilnadu. *Epidemiology*, 3: 130.