# Evaluation of healthy life style behaviors of academicians

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## ABSTRACT

*The aim of this study is to identify the healthy life style behaviors of academician in terms of some demographical variables. 200 Academicians voluntarily participated in the study from different universities in Turkey. Data was collected with healthy life style behavior scale İİ, developed by Rozmus et al. [1], and Esin [2] made the language adaptations for Turkish participants. Scale has 52 items and online form of the scale was used for participation. Cronbach's alpha value was found as 0.91. No significant difference was found among academic titles in terms of sub-dimensions of the scale. Significant differences were found among frequency of doing sports in terms of sub-dimensions. No significant difference was found between smoking variables. As frequency of doing sports increased, significant differences were found in favor of those doing sports more often. Consequently, it can be said that healthy life style behaviors of academician should be encouraged; activities that foster academician to do sports should be arranged. İt is important to lead academician to participate in sport activities for preventing health risks.*

**Key words:** Academicians, healthy life, health behaviors
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## INTRODUCTION

Healthy life has been defined in different ways. Most used and confirmed definition is health definition by WHO in 1946. According to WHO, health is not only the absence of disease or infirmity, but also being physically, mentally and socially well. Today's health understanding foresees health-centered approach that prevents, maintain and develop the health of person, family and society. This approach is based on achieving behaviors that person prevents, maintains and develops his/her health, and takes proper decisions about his wellness [3].

When it came to prevent and develop health, doctors, health servants and hospital came to mind first, afterwards it was noticed that healthy life styles was consistent with health [4].

İt is well known today that life styles such as nutrition, physical activity, smoking, and stress have impacts on cardiovascular system and health, morbidity and mortality in chronic diseases such as cancer, heart diseases, hypertension and diabetes can be reduced considerably by life style [5].Healthy life style was defined as controlling behaviors that affect person's health, while organizing daily activities, choosing appropriate behavior for health condition [6]. The person generating these behaviors to attitude can be able to maintain his/her wellness. Nutrition, stress management, exercise, spirituality, interpersonal relationships and health responsibility are counted as healthy life style behaviors [7,8].İn traditional definition, health concept was defined as only absence of diseases and infirmity. This definition put forward disease concept, evaluated individuals' health based on this concept and every individual having no symptom and infirmity were accepted as healthy. Development in science and technology today rebounded on health services, the infections that were considered in the past as the most important diseases lost their priority. Chronic and degenerative diseases such as cardiovascular problems, cancer took the place of

infections. These diseases arise from life style of individuals, and these diseases emerge as the most important problems in both developed and developing countries [9].

When developments in medicine and health in history are examined, it can bee seen that ill people were tried to be cured first, and then protection ways were searched. All these efforts were the aim to make people healthier. A lot of implications were developed for the purpose of protecting people from diseases and making them live healthier. Today, all these implications are called as Healthy Life Style [10].Healthy life style is defined as controlling all the behaviors that affect health, organizing appropriate behaviors by choosing them according to individuals' health status. The person generating these behaviors to attitude can develop his/her health status. Health behavior is all the behaviors that individual implicate to stay healthy and protect from diseases [11].

The aim of this study is to identify the healthy life style behaviors of academician in terms of some demographical variables.

## MATERIALS AND METHODS

200 Academicians voluntarly participated in the study from different universities in Turkey. These academicians filled out healthy Life Style Behaviors Scale in 1 October - 25 November 2013. Questionnaire consisted of 34 items including socio-demographic information of participants. Healthy Life Style Behaviors Scale was developed by Walker, Sechrist and Pender in 1987 for the aim of testing model of developing health. The scale assesses the behaviors developing health related to healthy life style. The scale has 48 items. There are 6 sub-dimensions including self-actualization, health responsibility, exercise, nutrition, interpersonal support and stress management. Each sub-dimension can be used individually. Mean of the scale yields the score of healthy life style behaviors [12,13]. Scale was developed again in 1995 by adding 4 more items by Walker, Sechrist and Pender. The only difference between old scale and new one is the additional items. 52-item-scale was used in this study [1].Self-actualization sub-dimension assesses life goals, ability to self-actualization of individuals, how well they know themselves and how much they make themselves happy.

Health responsibility sub-dimension assesses the level of responsibility on individuals' health.

Exercise sub-dimension assesses how proper individuals do exercises that are unchangeable unit of life. Nutrition sub-dimension assesses changes in individual's choices of meal and food selection. İnterpersonal support sub-dimension assesses communication of individual with close environment and the continuity level of this communication.

Stress management assesses the level of stress sources recognized by individual and identifies stress control mechanism. All items of healthy life style behaviors scale are positive. There is no reverse item. The scale is 4-likert [Never, Sometimes, Often and Regularly]. The lowest score is 52 and the highest one is 208. Reliability and validity analyzes were done by Pender et al. [14]. Cronbach's alpha internal consistency coefficient was found between 0.70 and 0.90. Reliability and validity analyzes of Turkish version of the scale was done by Esin [2]. Cronbach's alpha internal consistency coefficient was found as 0.91 [2].Descriptive analyzes of academicians were done as frequency, percentage and mean. One-way ANOVA was used to analyze differences in doing sport frequency in terms of dimensions of the scale. Pearson product correlation was used to analyze the relationship between age, doing sport frequency and sub-dimensions of the scale.

## RESULTS AND DISCUSSION

The aim of this study was to identify the healthy lifestyle behaviors of academicians in terms of some demographical variables. No significant difference was found in terms of smoking variables [p>0.05]. No significant difference was found in terms of academic titles. İn table 1, analyzes of doing sport frequency in terms of sub-dimensions are shown. Physical activity, health responsibility, spiritual development, nutrition values of participants answered never in doing sport frequency are lower than both those answered sometimes and regularly [p<0.05]. No significant difference was found in interpersonal relations and stress management [p>0.05].Ozkan and Yilmaz [11] found significant differences between individuals doing sports regularly and those not doing sports regularly in terms of self-actualization, health responsibility, exercise, nutrition, interpersonal support, stress management, those who do sport regularly showed higher scores. Yalcinkaya, Ozer and Karamanoglu [15] found that people who do exercise more often in a week had higher scores in terms of healthy life style behaviors. Positive correlation was found between physical activity level and health responsibility [p<0.01, r=0.62], spiritual development [p<0.01, r=0.56], interpersonal relationship [p<0.01, r=0.44], nutrition [p<0.01, r=0.68], stress management [p<0.01, r=0.51].

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İt can be said that while physical activity level increases health responsibility, spiritual development, interpersonal relationship, nutrition, stress management levels also increase.

Positive correlation was found between frequency of doing sports and health responsibility [p<0.01, r=0.34], spiritual development [p<0.01, r=0.29], nutrition [p<0.01 r=0.37], stress management [p<0.01, r=0.23]. İ can be concluded that while frequency of doing sports increase, health responsibility, spiritual development, nutrition and stress management levels also increase.

When the aims of doing sport are examined, the reasons such as having the pleasure and fun, increasing work efficiency, creating social environment and making new friends can be said. The background reasons of doing sports can be sort as leisure time, aging, competitive interest and diseases [16].

Healthy life style, happiness and efficiency of academicians working at universities have close relation with our society. It is a necessity that specifying and implication of motivating activities for academicians should be organized for the future. While sport events are organized, the activities that academicians can participate should be planned. It is important to support health-developing behaviors such as increasing the number of sport fields, preparing free exercise programs, offering healthy choices in restaurants for participation of academicians in sport activities [17].It is important to note that this study used cross-sectional design. Studies with cross-sectional provide information for the future studies on various fields. In this way, the information of various fileds can be found by the future researchers [18]. According to studies made in aerobic activities, rate of life, satisfaction of job and with academic successfully [19,20,21].

The healthy life style behaviors of academicians can be evaluated by the future researchers by using different data collection tools to reach more trustable data.

Consequently, it can be said that healthy life style behaviors of academicians should be encouraged; activities that foster academicians to do sports should be arranged in universities. İt is important to lead academician to participate in sport activities for preventing health risks.

**Table 1. Analyzes of doing sport frequency in terms of sub-dimensions**

|  |  | N | Mean | Std. Deviation | F | P |
|---|---|---|---|---|---|---|
| Physical Activity | Never | 26 | 1.31 | 0.35 | 30.66 | 0.00* |
|  | Sometimes | 126 | 2.20 | 0.51 |  |  |
|  | Regularly | 48 | 3.07 | 0.64 |  |  |
|  | Total | 200 | 2.28 | 0.72 |  |  |
| Health Responsibility | Never | 26 | 1.97 | 0.73 | 5.11 | 0.00* |
|  | Sometimes | 126 | 2.51 | 0.61 |  |  |
|  | Regularly | 48 | 2.80 | 0.44 |  |  |
|  | Total | 200 | 2.51 | 0.63 |  |  |
| Spiritual Development | Never | 26 | 3.04 | 0.90 | 3.39 | 0.03* |
|  | Sometimes | 126 | 3.35 | 0.42 |  |  |
|  | Regularly | 48 | 3.57 | 0.25 |  |  |
|  | Total | 200 | 3.36 | 0.48 |  |  |
| Interpersonal Relationships | Never | 26 | 3.22 | 0.77 | 0.85 | 0.43 |
|  | Sometimes | 126 | 3.20 | 0.53 |  |  |
|  | Regularly | 48 | 3.41 | 0.39 |  |  |
|  | Total | 200 | 3.25 | 0.53 |  |  |
| Nutrition | Never | 26 | 1.97 | 0.50 | 5.99 | 0.00* |
|  | Sometimes | 126 | 2.44 | 0.49 |  |  |
|  | Regularly | 48 | 2.71 | 0.46 |  |  |
|  | Total | 200 | 2.44 | 0.52 |  |  |
| Stress Management | Never | 26 | 2.43 | 0.82 | 2.39 | 0.09 |
|  | Sometimes | 126 | 2.53 | 0.50 |  |  |
|  | Regularly | 48 | 2.86 | 0.52 |  |  |
|  | Total | 200 | 2.59 | 0.56 |  |  |

**Table 2.Correlation analyzes between age, doing sport frequency, year of work and sub-dimensions**

|  |  | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |
|---|---|---|---|---|---|---|---|---|---|---|
| Age (1) | r | 1 | 0.01 | -0.00 | 0.03 | 0.03 | -0.01 | 0.20 | 0.10 | 0.73[**] |
|  | p |  | 0.89 | 0.99 | 0.74 | 0.78 | 0.90 | 0.08 | 0.39 | 0.00 |
|  | N | 200 | 200 | 200 | 200 | 200 | 200 | 200 | 200 | 200 |
| Doing sport frequency(2) | r | 0.01 | 1 | 0.68[**] | 0.34[**] | 0.29[*] | 0.12 | 0.37[**] | 0.23[*] | 0.13 |
|  | p | 0.89 |  | 0.00 | 0.00 | 0.01 | 0.29 | 0.00 | 0.04 | 0.25 |
|  | N | 200 | 200 | 200 | 200 | 200 | 200 | 200 | 200 | 200 |
| Physical activity(3) | r | -0.00 | 0.68[**] | 1 | 0.62[**] | 0.45[**] | 0.22 | 0.61[**] | 0.57[**] | 0.06 |
|  | p | 0.99 | 0.00 |  | 0.00 | 0.00 | 0.05 | 0.00 | 0.00 | 0.61 |
|  | N | 200 | 200 | 200 | 200 | 200 | 200 | 200 | 200 | 200 |
| Health responsibility(4) | r | 0.03 | 0.34[**] | 0.62[**] | 1 | 0.56[**] | 0.44[**] | 0.68[**] | 0.51[**] | 0.01 |
|  | p | 0.74 | 0.00 | 0.00 |  | 0.00 | 0.00 | 0.00 | 0.00 | 0.89 |
|  | N | 200 | 200 | 200 | 200 | 200 | 200 | 200 | 200 | 200 |
| Spiritual development(5) | r | 0.03 | 0.29[*] | 0.45[**] | 0.56[**] | 1 | 0.73[**] | 0.49[**] | 0.61[**] | -0.07 |
|  | p | 0.78 | 0.01 | 0.00 | 0.00 |  | 0.00 | 0.00 | 0.00 | 0.52 |
|  | N | 200 | 200 | 200 | 200 | 200 | 200 | 200 | 200 | 200 |
| Interpersonal relationship(6) | r | -0.01 | 0.12 | 0.22 | 0.44[**] | 0.73[**] | 1 | 0.44[**] | 0.53[**] | -0.22 |
|  | p | .90 | 0.29 | 0.05 | 0.00 | 0.00 |  | 0.00 | 0.00 | 0.05 |
|  | N | 200 | 200 | 200 | 200 | 200 | 200 | 200 | 200 | 200 |
| Nutrition(7) | r | 0.20 | 0.37[**] | 0.61[**] | 0.68[**] | 0.49[**] | 0.44[**] | 1 | 0.54[**] | 0.08 |
|  | p | 0.08 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |  | 0.00 | 0.50 |
|  | N | 200 | 200 | 200 | 200 | 200 | 200 | 200 | 200 | 200 |
| Stress management(8) | r | 0.10 | 0.23[*] | 0.57[**] | 0.51[**] | 0.61[**] | 0.53[**] | 0.54[**] | 1 | 0.00 |
|  | p | 0.39 | 0.04 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |  | 0.99 |
|  | N | 200 | 200 | 200 | 200 | 200 | 200 | 200 | 200 | 200 |
| Year of Work(9) | r | 0.73[**] | 0.13 | 0.06 | 0.01 | -0.07 | -0.22 | 0.08 | 0.00 | 1 |
|  | p | 0.00 | 0.25 | 0.61 | 0.89 | 0.52 | 0.05 | 0.50 | 0.99 |  |
|  | N | 200 | 200 | 200 | 200 | 200 | 200 | 200 | 200 | 200 |
| *** p<0.01, * p<0.05* | | | | | | | | | | |

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