Healthy lifestyle in teachers

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ABSTRACT

Introduction: The role of individual healthy behaviors like physical activity, nutrition and stress management on reduction of rate of disease mortality and morbidity is well known. The aim of this study is to determine healthy life style in teachers employed in district No.4 in Isfahan, Iran, in 2010. Materials and Methods: The participants of this cross-sectional study were 96 teachers in district No. 4, selected via random sampling method. The data collection was performed using a questionnaire including demographic healthy lifestyle questions. Analysis of the data was performed through Software SPSS version 18. Results: The mean age of the subjects was 40.26 ± 6.05 years and, BMI mean was 25.08 ± 3.20. 96.8% of them were married and 3.1% also were single. 1% of the teachers had a weak lifestyle, 13.5% had moderate, 85.4% had a good lifestyle. In terms of nutrition, 2% of the teachers had a weak lifestyle, 23% moderate, 74% good. 76% in terms of physical activity, 29.2% smoking and 21.9% stress had a weak lifestyle. Conclusion: According to the results, planning for teachers in school for receiving information about healthy lifestyle is important.

Key words: Healthy lifestyle, Iran, teacher

INTRODUCTION

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.

Studies have indicated that there is a strong correlation and relationship between health and lifestyle. American Heart Association in 2001 introduced lifestyle as an important susceptible cause of mortality in the U.S. and stated that approximately 70 percent of all the physical and mental diseases are related to the lifestyle. Moreover, 53 percent of mortality causes are associated with people’s lifestyle. Currently many health problems such as obesity, cardiovascular disorders, cancer, drug addiction and sexually transmitted diseases are correlated with lifestyle modifications and changes. Inappropriate lifestyle is also one of the effective factors on incidence of chronic diseases such as colon cancer hypertension, chronic obstructive pulmonary disease, renal cirrhosis, stomach ulcers, AIDS and cardiovascular diseases. More than one-third of all the mortalities worldwide are due to several threatening behaviors resulting from inappropriateness of individual and social lifestyle most of them are inappropriate diet, low physical activity, smoking and inappropriate sexual behavior. Controlling risk factors in lifestyle and healthy habits such as inappropriate nutrition, lack of physical activity, smoking, alcohol consumption and drug use almost can reduce 50 percent of early deaths.

The study results of Charkazi et al. showed that lifestyle of 84 percent of teachers in Gorgan City was semi-desirable.
Other studies showed that lifestyle status is not favorable in teachers.\[8\]

Given to the determinant role of lifestyle variable in promoting health and increasing quality of life (QoL) and due to the sensitive role of teachers as effective human forces in development and evolution of our society and also considering that students follow their patterns and lack of necessary information from teachers’ lifestyle in Esfahan Province, the present study aimed to review teachers’ lifestyle among them in order to determine their lifestyle and providing intervention and strategy, if necessary.

MATERIALS AND METHODS

This descriptive-analytical study was conducted on 96 teachers in girl schools of district No. 4 in Education Department of Esfahan Province in 2010 with multi-stage sampling method. Thus, first district No. 4 was randomly selected among 6 districts of Education Department and 4 schools from each grade (elementary, secondary and high school) and 8 teachers from each school were randomly selected.

Data collections tools were a two-part questionnaire consisting of demographic variables (age, number of family members, BMI, marital status, educational level, employment status and financial condition) and questions related to lifestyle assessment including nutrition, physical activity, coping with stress, smoking and using seat belt completed through self-report data.

It also should be noted that questions related to healthy nutrition assessment had 14 items and those related with stress coping had 6 items and there also were 3 items for smoking assessment, 2 for using seat belt and 7 for physical activity assessment scored by 5-point Likert scale (completely disagree, disagree, no comment, agree, completely agree). Eventually, the scores in each part were divided into three categories (undesirable, semi-desirable and desirable). The validity of the questionnaire conducted through content validity method by health educationalists and its reliability through Cronbach’s alpha obtained 80.0 for each part. Collecting the data, their analysis conducted through descriptive statistics and Kruskal-Wallis, and ANOVA. It should be noted that written consent form was obtained from each school were randomly selected.

Frequency distribution of various healthy lifestyles (nutrition, stress management, smoking, physical activity and using seat belt) are illustrated in [Table 1].

ANOVA test showed that there was a significant relationship between healthy lifestyle and age (P = 0.019; f = 3.67); so that in the healthy lifestyle group, mean age of individuals was 39.80 ± 4.63 years and was lower than other groups. In addition, there was a significant relationship between BMI and healthy lifestyle (P = 0.045; f = 4.27); so that those with lower BMI had a more healthy lifestyle.

Kruskal-Wallis test showed that there was no significant correlation between marital status (P = 0.483), educational level (P = 0.165) and employment status (P = 0.45).

RESULTS

The results showed that mean age of the subjects was 40.26 ± 4.82 years, and their mean BMI was 25.08 ± 3.20 kg/m². Mean of household size was 3.75 ± 0.85 and mean working experience was 18.34 ± 6.05 years. In addition, 93 of them were married (96.8%).

In terms of educational level, 5 of them were high school graduates (5.2%), 21 had associate degree (21.9%), 61 had BSc degree (63.5%) and 9 of them had MSc degree (9.4%). In addition, 89 of them were formal employment (92.7%), 3 of them had contract (3.1%) and 4 of them were tuition teachers (4.2%).

In terms of financial conditions, 2 teachers had a high financial level (3.1%), 57 teachers had a good financial level (59.4%) and 37 of them had a moderate financial level (38.5%).

In terms of healthy lifestyle, the results showed that totally 82 teachers (85.4%) had a desirable situation, 13 teachers had semi-desirable situation (13.5%) and 1 of them had undesirable lifestyle (1%).

DISCUSSION

Given to the determinant role of lifestyle in promoting health and increasing quality of life (QoL) and due to the sensitive role of teachers as effective human forces in development and evolution of our society and also considering that students follow their patterns and lack of necessary information from teachers’ lifestyle in Esfahan Province, the present study

| Status Dimensions                  | Desirable Number (%) | Semi-Desirable Number (%) | Undesirable Number (%) | Total Number (%) |
|-----------------------------------|----------------------|---------------------------|------------------------|------------------|
| Nutrition                         | 71 (74)              | 23 (24)                   | 2 (1.2)                | 96 (100)         |
| Physical activity                 | 23 (24)              | 73 (76)                   | 0 (0)                  | 96 (100)         |
| Seat belt                         | 37 (38.5)            | 56 (58.3)                 | 3 (3.1)                | 96 (100)         |
| Stress management                 | 75 (78.1)            | 21 (21.9)                 | 0 (0)                  | 96 (100)         |
| Smoking                           | 68 (70.8)            | 28 (29.2)                 | 0 (0)                  | 96 (100)         |
aimed to review teachers’ lifestyle among the teachers of girl schools in District No. 4.

The present study was on 96 employed teachers in district No. 4 in Isfahan City which showed lifestyle of 1 teacher was undesirable, and 13.5 percent had semi-desirable lifestyle that indicated a lower percentage than the study of Bakhtari (48.8%).[9] However, in the study of Rahnavard, lifestyle of 50 percent was undesirable.[10]

In the present study, 24 percent of teachers had a good physical activity which was in accordance with the study of Charkazi (23.6%).[7] In the study of Dearden, physical activity of women was undesirable and the reasons were individual, familial and social factors such as shortage of facilities and equipments, lack of a secure place for walking and time limitation.[11] It seems that in the present study also, time limitation for teachers (due to daily presence in schools) caused that 76 percent of them had a semi-desirable physical activity. While in the study of Farmanbar, only 47.7 percent of study subjects had physical activity and exercise just for risky situations for health.[12] In the study of Charkazi also 39 percent of them announced they did not have enough time to do the physical activities.[11]

In a study Sadeghi has been done in Isfahan City, the results showed that 70 percent of the study subjects somehow had physical activity and exercise most common of which were walking and morning exercises.[13] This was not in accordance with our study. This might be due to employment of teacher in schools; however, this issue can be reduced by appropriate planning during a day or some hours can be assigned for teachers’ physical activity.

In the present study, 78.1 percent of individuals had a desirable stress management which had a higher percentage than the studies of Mazouji and Farmanbar;[12,14] however, it was similar to the study of Baroogh (79%).[15] The difference was be due to the necessity of stress management in teachers to have an appropriate behavior with students.

In the present study, 24 percent of the teachers had a semi-desirable nutrition and 2.1 percent had an undesirable condition. In the study of Charkazi, 4.2 percent of subjects also had an unhealthy diet.[10] In the study of Farmanbar, 58.8 percent of university students also had a risk situation for health in terms of food habits.[12]

The results of a study done in Tehran on teacher showed that only 27.7 percent of subjects used safe diet.[16]

Considering that lack of appropriate information about nutrition can cause weaken of a healthy nutritional functioning, it seems it was due to lack of adequate information about healthy nutrition.

Considering that osteoporosis has a high prevalence among women, regular exercising and physical activity seem necessary for prevention from this disease. Studies have shown that nutrition and physical activity can have an important role in mineral density of bone.[17]

In addition, deviation from proper nutrition in one hand can cause food deficiency and causes diseases resulted from malnutrition and on the other hand is associated with excessive use of fats, meats, sugar and salt which by itself is a factor in incidence of chronic diseases. It is believed that many chronic diseases such as cardiovascular diseases, myocardial infarction, diabetes, obesity and cancer which cause disabilities and early deaths are associated with diet.[18] Finally, it can be announced that educating healthy lifestyle, particularly about modification of diet, is necessary and effective for teachers. This also has been proved in other studies.[19-21]

In the present study, lifestyle in terms of using seat belt only was undesirable in 3.1 percent of people and a high percentage of them stated that they use seat belt. This was also seen in the study of Charkizi.[7] It seems one of the reasons for improvement of using seat belt in these years has been obligatory rule for using safety belt and extensive ads in this regard through mass media.

In terms of smoking or exposed to cigarette smoke, 70.8 percent of the study subjects had a desirable lifestyle. In the study of Charkizi, 94 percent of people also stated that they are not smokers; however, the mentioned study has been done on both sexes.[7] While in the study of Sahebzamani, 3 percent of girls used to smoke cigarette and 26.9 percent used to smoke waterpipe.[19] In the study of Samimi, lifestyle of individuals in smoking dimension reported 87.7 percent desirable, 9.8 percent almost desirable and 2.5 percent undesirable.[24]

Although smoking increased among university students, it seems cigarette smoking socially is not that accepted among the society of teachers and the fact that they are as a reference for students, a low number of them had undesirable lifestyle and given to low prevalence of smoking among women of Iran and conducting this study on employed female teachers, it seems that 29.2 percent of those who had undesirable lifestyle in this regard, have smoker members in their family.

In the present study, lifestyle had a significant correlation with age and this was also seen in the study of Elzeiny;[23] however, it was not significant in the study of Charkizi.[7] The reason could be due to difference in mean age of both groups of study subjects and also that was because mean age of our study subjects was lower than the Charkazi’s. Nevertheless, in this study, lifestyle had no significant correlation with educational level; it could be due to the reason that they had degree in different majors such as geology, religion and etc, and lack of information about healthy lifestyle thorough other ways such as written and visual media.

**CONCLUSION**

Considering that a relatively high percent of the study subjects had a semi-desirable lifestyle in healthy nutrition, physical
activity and stress management, the necessity of planning for teacher working in schools and also obtaining information in establishing a healthy lifestyle can be very effective.

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