

Students Knowledge towards Healthy Lifestyle in Thi-Qar Technical Institution, Iraq

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Article Info

ISSN (online): 2583-5289

Volume: 04

Issue: 01

January-February 2025

Received: 10-11-2024

Accepted: 12-12-2024

Page No: 23-28

Abstract

Background: Healthy lifestyle practices have been emphasized as an essential factor in health promotion and illness prevention. Individuals who engaged good lifestyle practices early in childhood are better able to tolerate health hazards later in life.

Objectives of this study was to assess the students' knowledge about healthy lifestyle in Thi-Qar Technical Institute.

Methods: A cross-sectional questionnaire study of 126 university students conducted at the Thi-Qar Technical Institute. Pre-tested, structured questionnaires were employed. A stratified random sample approach was applied to guarantee representation from different academic departments, age groups, and genders.

Results: A total of 126 students participated, of which 75.4% were female. 58.7% were aged between 20 to 24 years. More than half (75.4 %) of the study participants were female. 54% of students had a medium knowledge level, followed by 42% whose knowledge level was good, while 4% had a poor knowledge level. Our study found no statistically significant relationship between the level of students' knowledge about a healthy lifestyle and demographic characteristics (P -value>0.05).

Conclusion: Overall students' knowledge about a healthy lifestyle were acceptable. Intervention educational programs can greatly enhance students' healthy lifestyle behaviors and health outcomes.

DOI: <https://doi.org/10.54660/IJMCR.2025.4.1.23-28>

Keywords: healthy lifestyle, knowledge, Thi-Qar

Introduction

A healthy lifestyle is demonstrated via good health habits that are followed in order to be healthy and prevent disease (Tamanal & Kim, 2020) ^[17]. Healthy lifestyle practices are crucial in health promotion and may reduce disease indicators. Individuals who adopt healthy lifestyle practices can survive health risks associated with disability and illness in later life (Lowry *et al.*, 2002) ^[11]. Science believes lifestyle to be one of the most important factors determining human health. However, the word healthy lifestyle has become a widely used slogan used by different organizations to promote the activities of social groups and push them towards desirable habits. (Soroka *et al.*, 2023) ^[16]. In the twenty-first century, 50% of all fatalities worldwide are caused by lifestyle (Rahmadhani *et al.*, 2023) ^[13].

Medical students are more aware of suitable diets and lifestyles. Their actions may now need to change in order to maintain good health. The world is suffering an epidemic of non-communicable illnesses, and lack of physical activity has been recognized as one of the major risk factors for these diseases. (Jahan *et al.*, 2023) ^[9]. Adequate and nutritious eating is a human right that must be linked with the individual's biological and social traits, as well as his or her unique dietary demands and the region's cultural past (Mahmood *et al.*, 2024) ^[12]. It should be available, economical, and harmonious in quantity and quality, according to the concepts of diversity, balance, moderation, and enjoyment, in addition to being established on adequate and sustainable production procedures (Cerqueira Sousa *et al.*, 2023) ^[6]. When university students enter college, their eating habits change. Since students typically eat out of their homes and must rely on businesses at or near the school, the daily routine can sometimes negatively impact their eating habits (de Souza Oliveira *et al.*, 2017) ^[7].

Limiting salt intake, added sugars, and trans and saturated fats. Teenagers should participate in team sports, dancing, swimming, cycling, brisk walking, and other forms of moderate-to-intense physical activity for 60 minutes every day. Every night, adolescents need 8 to 10 hours of sleep in order to grow and develop to their full potential.

Coping strategies that adolescents can use to manage stress include talking to a friend or trusted adult, exercising, and relaxing. (Abdel-Baset Taha *et al.*, 2023) ^[1]. Although young people are becoming more aware of the benefits of a healthy lifestyle, they still lack the necessary behaviors (Algahtani, 2020) ^[2]. The World Health Organization states that 60% of a person's life quality is determined by their behavior and way of living. Therefore, fostering healthy living habits in teens is essential to preventing disease and maintaining a healthy lifestyle. (Sawyer *et al.*, 2012) ^[15].

Methodology

Study Design

A cross-sectional descriptive study was designed to assess students' knowledge about healthy lifestyles. This approach enables data collecting at one point in time to evaluate the present level of knowledge.

Study Population and Sampling

The target population included all students enrolled at the Thi-Qar Technical Institute. 126 university students were selected by stratified random sampling techniques that were adopted to guarantee representation from different academic departments, age groups, and genders.

Data Collection Tool

A structured questionnaire developed based on validated instruments used in similar studies. Prior the data to be collected, the questionnaire pre-tested with a small group of students to ensure clarity, reliability, and validity. The questionnaire is divided into three sections: demographic information (age, gender, department), knowledge assessment of key aspects of a healthy lifestyle (nutrition, physical activity, mental health, sleep hygiene, and harmful practices), and self-reported lifestyle practices (diet, exercise, and sleep patterns).

Knowledge Assessment

Questions on nutrition, physical activity, mental health, sleep

hygiene, and harmful lifestyle behaviors. The assessment includes multiple-choice and Likert-scale questions to measure awareness of recommended dietary habits, exercise guidelines, stress management techniques, and the risks associated with smoking and unhealthy eating. Each correct answer contributes to a knowledge score, which is categorized as high, medium, or low, enabling the identification of knowledge gaps and areas requiring targeted health education interventions. Good when the total score was > 75% (>12 points), Medium when the total score was 50% to 75% (8 to 12 points), Poor when the total score was less than <50% (<8 points).

Ethical considerations

The study was approved by the Southern Technical University/Thi-Qar Technical Institute before collecting the data. Ensuring voluntary participation in this study. Students should be made aware of the purpose, methods, and potential outcomes of any health-related programs or research conducted within the institution. Any data collected about students' health, habits, or knowledge should be kept confidential and used solely for intended purposes.

Statistical Analysis

The data was entered, edited, coded, and summarized using descriptive statistics like numbers and percentages. A Pearson Chi-squared test was used to examine the relationship between demographic characteristics and students' knowledge of a healthy lifestyle. IBM SPSS Statistics 25 was used to analyze the data, and a p-value ≥ 0.05 was considered statistically significant.

Result

A total of 126 students participated in this study, of which 75.4% were female. 58.7% were aged between 20 to 24 years and followed by 38.1 % were under 20 years, while only 0.8% of them are in the age group of more than 30 years. The majority (75.4%) of the study sample were females, while 24.6% were males. Regarding the department, our results demonstrated that a high percentage (56.3%) of study participants were from community health technologies department, followed by 26.2% from nursing technology department, while the smallest percentage (0.8%) of them from Department of electrical technologies, presented in Table 1.

Table 1: Demographic characteristics of students participant in this study (n=126)

	Variables	Frequency (n)	Percent (%)
Gender	Female	95	75.4
	Male	31	24.6
	Total	126	100.0
Age group	Under 20 years	48	38.1
	20-24 years	74	58.7
	25-30 years	3	2.4
	More than 30 years	1	0.8
	Total	126	100.0
Department	Office management department	1	0.8
	Department of medical laboratory technologies	20	15.9
	Department of electrical technologies	1	0.8
	Department of nursing technology	33	26.2
	Department of community health technologies	71	56.3
	Total	126	100.0

Figure 1 shows the distribution of the level of knowledge about a healthy lifestyle according to the age group of the students. The current study found that the age group 20-24

years has a higher level of knowledge compared to the other age groups.

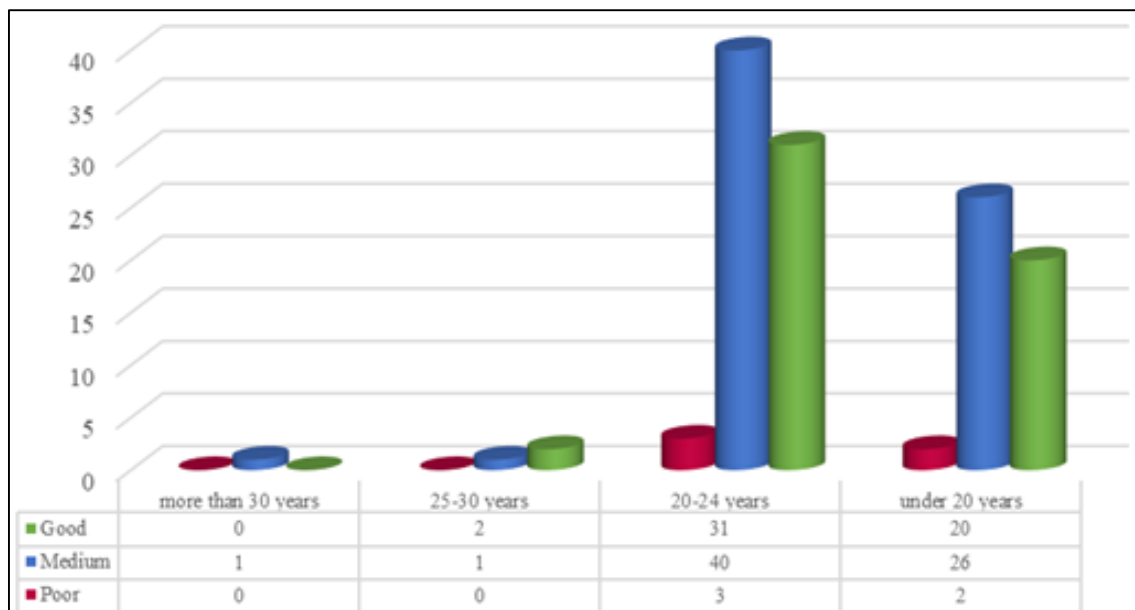


Fig 1: Distribution of knowledge level according student's age (n=126)

Table 2 shows the relationship between the level of student's knowledge about healthy lifestyle and the demographic characteristics. Our study found a no statistically significant

relationship between the level of knowledge of students about a healthy lifestyle and demographic characteristics of study sample (P -value>0.05).

Table 2: The association between demographic characteristics and the level of knowledge of students about a healthy lifestyle

			Acknowledge assessment			P-value
			Good	Medium	Poor	
Gender	Female	N	43	47	5	0.134
		%	45.3%	49.5%	5.3%	
	Male	N	10	21	0	
		%	32.3%	67.7%	0.0%	
Department	Office management department		N	1	0	0.119
			%	100.0%	0.0%	
	Department of medical laboratory technologies		N	12	8	
			%	60.0%	40.0%	
	Department of electrical technologies		N	0	1	
			%	0.0%	100.0%	
	Department of nursing technology		N	11	18	
			%	33.3%	54.5%	
Age group	Under 20 years		N	20	26	0.949
			%	41.7%	54.2%	
	20-24 years		N	31	40	
			%	41.9%	54.1%	
	25-30 years		N	2	1	
			%	66.7%	33.3%	
	More than 30 years		N	0	1	
			%	0.0%	100.0%	

P -Value ≤ 0.05 (significant); p -value > 0.05 (non-significant)

Figure 2 shows the distribution of the knowledge level by gender. Our results showed that the level of knowledge

among females is higher than males.

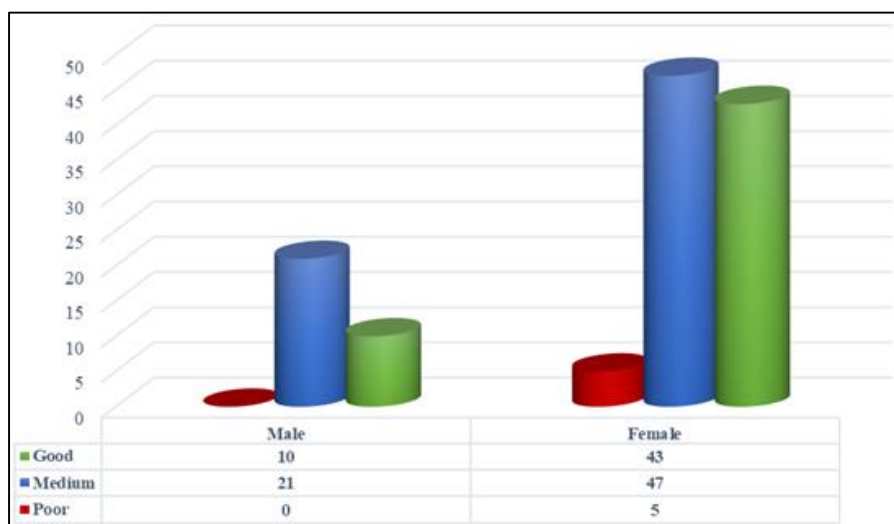


Fig 2: Distribution of knowledge level according gender (n=126).

Figure 3 shows Overall assessment of student's knowledge about a healthy lifestyle. The present study found that 54% of students had a medium knowledge level, followed by 42% whose knowledge level was good, while 4% had a poor knowledge level. Figure 4 shows distribution of the

study sample according to the source of information about a healthy lifestyle. The results of this study discovered that 67% of the source of information was from the Internet, followed by 16% from friends or family, while only 5% came from books and reading.

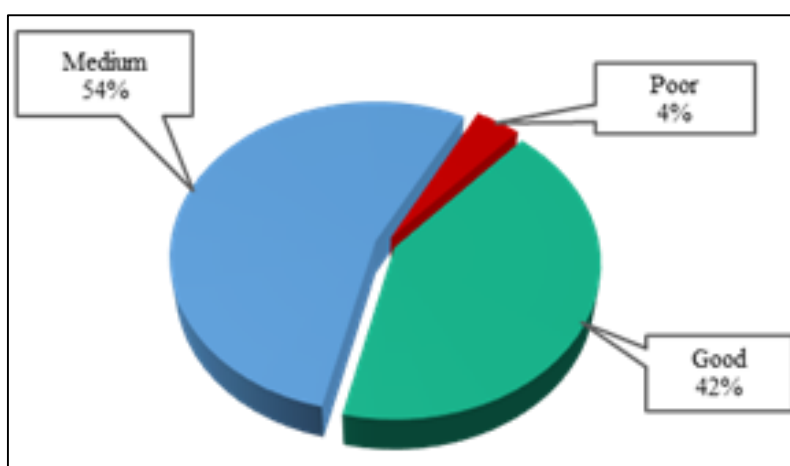


Fig 3: Overall assessment of student's knowledge about healthy lifestyle (Good >12 points), Medium 8 to 12 points, Poor <8 points).

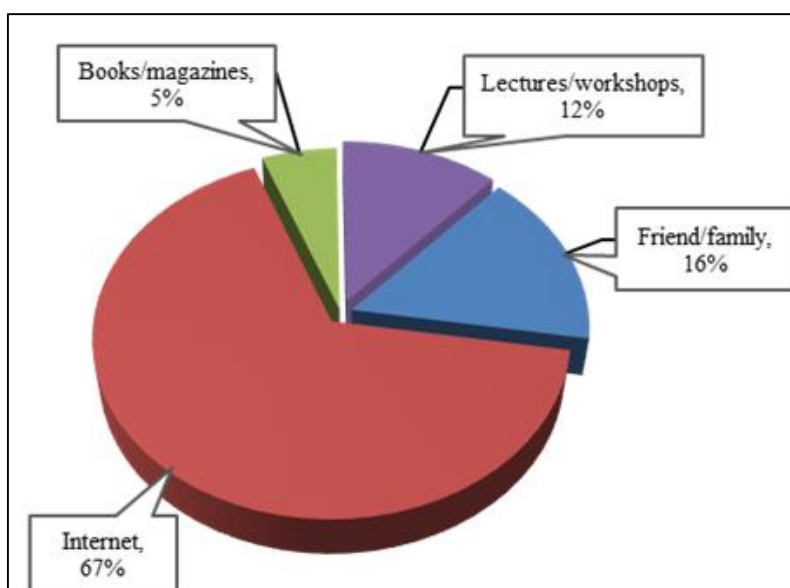


Fig 4: Distribution of the study sample according to the source of information about a healthy lifestyle (n=126)

Discussion

A student's healthy lifestyle is determined by their own behavioral choices. A healthy lifestyle involves a complex pattern of self-initiation and perceptions (Jahan *et al.*, 2023) ^[9]. In this study, 54% of students had a medium knowledge level about healthy lifestyle, followed by 42% whose knowledge level was good, while 4% had a poor knowledge level. This could be attributed to the fact that the study population consisted of university students, who are typically considered to have an advanced level of education. On the other hand, another research in Shiraz revealed that participants' mean score for knowledge questions was 2.8 out of 6 and for practice questions was 3.6. These findings raise questions regarding the scope of their knowledge and practice. The majority of knowledge and practice questions had a 50% right answer rate (Askarian *et al.*, 2013) ^[4]. However, it should be recognized that a lifestyle is determined by a number of factors over which a person may have no control. These processes are linked to elements of the contemporary market economy, such as hyper-capitalism and globalization, heightened consciousness of the detrimental and long-lasting effects of society's modernization and digitization, and the diminishing importance of tradition in everyone's daily lives. (Bocian, 2011) ^[5]. In Iraq, raising awareness of a healthy lifestyle among students is accomplished through the system of higher and secondary special education; the family education system, which instills family and national values; and the purposeful action of state and non-state systems. There are economic, social, human, political, historical, educational, psychological, national and integrated factors in creating awareness of a healthy lifestyle.

The current study demonstrated that there were differences between genders in healthy lifestyle behaviors. In many cultures, females are historically expected to take on caring tasks, which frequently involve maintaining the health and well-being of family members. This responsibility may encourage women to seek more knowledge about nutrition, fitness, and preventive healthcare. While a study in Tanzania found that there is a difference in knowledge between genders, it was found that females had the highest perception of desirable behaviors such as drinking water, breathing air, eating habits, temperance, and trust. Males performed better than females on two healthy lifestyle behaviors: sleep and physical activity (James *et al.*, 2022) ^[10].

In addition, our study found that most of the student's information about healthy lifestyle was obtained from the internet, followed by friends and family, while the least source of information was from books and reading. Our study is consistent with the study conducted on students of Kazan Federal University, which found that the internet is the main source of health-related information for most students (Ishkineeva *et al.*, 2019) ^[8]. When comparing medical students to non-medical students, it is sometimes considered that the former know more about good eating and lifestyle practices. However there is little evidence to demonstrate that this knowledge translates into sustaining good health habits (Sakamaki *et al.*, 2005) ^[14]. Healthy food habits among medical students are even more significant as they are future physicians and the students who individually overlook adopting healthy living are more likely to fail to promote health promotion possibilities for their patients. Numerous programs have demonstrated the requirement for a variety of inputs, including information, awareness of the issue, attitude, and perception, in order to adopt new behavior or

modify existing behavior. Although it is doubtful that behaviors would change without more information, the majority of writers discovered that knowledge is not enough to significantly alter preventative behavior. (Alissa *et al.*, 2015) ^[3]. Overall most students were aware of the benefits of healthy life style however they were not implementing it effectively in their everyday lives.

Conclusion and Recommendation

The study's findings demonstrated the students' knowledge about a healthy lifestyle practices were acceptable. The level of knowledge among females is higher than males. No statistically significant relationship between the level of students' knowledge about a healthy lifestyle and demographic characteristics. Educational programs that. The internet was the main source of information a healthy lifestyle for most students. We recommend implement health education programs to promote healthy lifestyles among students included the psychological, dietary, and bodily triads, and all health professionals in their daily routine lives.

Acknowledgment

The author are deeply grateful to all staff of the Southern Technical University/Thi-Qar Technical Institute and students for their cooperation.

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