Lifestyle Practices and Awareness Regarding Lifestyle Diseases among Adolescent Girls

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Abstract: *Adolescence is a crucial period of rapid transition from childhood to adulthood. The impact of unhealthy lifestyle practices are seen in the form of lifestyle diseases at an early age. The study entitled "lifestyle practices and awareness regarding lifestyle diseases among adolescent girls was carried out with the objective to assess the lifestyle practices of the adolescent girls, awareness regarding lifestyle diseases and to find out association between awareness regarding lifestyle diseases and lifestyle practices of the adolescent girls in selected schools of Thiruvananthapuram corporation. The study was done by quantitative approach and research design used was descriptive cross sectional design. Data was collected from 330 adolescent girls of Government, aided and private higher secondary schools of Thiruvananthapuram corporation, studying in 9th, 10th, 11th and12th standards. A self prepared questionnaire and three point Likert scale respectively were used for collecting the data regarding lifestyle practices and awareness regarding lifestyle diseases among adolescent girls. The data were analyzed using descriptive and inferential statistics. From the study it was observed that most (83.9%) of the adolescent girls had moderately healthy lifestyle practices, 15.2% had healthy lifestyle practices and only 0.9% had unhealthy lifestyle practices. The study also revealed that majority (57.3%) of the adolescent girls had moderate awareness, 37% had poor awareness and only 5.8% had good awareness regarding lifestyle diseases. The findings revealed that there is significant statistical association between awareness regarding lifestyle diseases and lifestyle practices of the adolescent girls. (χ2 - 21.22, P<0.01).*

Keywords: adolescents, lifestyle practices, awareness, lifestyle diseases

1. Introduction

Health and vigour are worth more than gold, a robust body more than great wealth. No riches are preferable to physical well - being, and no joy is greater than a cheerful heart" (Sirach 30: 15 - 16)

The term' Lifestyle' is often used to denote " the way people live". It is away of living of individuals, families and societies which manifest in coping with their physical, psychological, social and economic environment on a day to day basis. It is a composite of motivations, needs, and is influenced by factors such as culture, family, reference groups and social class. A balanced healthy lifestyle incorporates being physically active, eating healthy nutritious food, managing stress and getting an adequate amount of sleep[2]

Adolescence is a period of transition between childhood and adulthood - a time of physical, cognitive, social and emotional wellbeing[3]. Adolescents forms two - thirds of total population. Today's adolescents are the adults of tomorrow. Adolescence period is a crucial period in which they adopt various healthy and unhealthy lifestyle practices. India has the largest population of adolescents in the world. According to 2011 census report, India has243 million adolescents[4]

Lifestyle refers to the way in which a person or group of people lives and works[5]. Adolescents today are subjected to various stimuli that shape or influence their lifestyle as well as their perception about self and society. Lifestyle practices are influenced by parents, peer groups, teachers and mass media[6].

The diseases which primarily arise from the abnormal lifestyle of a person are termed as "Lifestyle diseases "and these are also known as Non communicable diseases (NCDS) [7]. As per the report of WHO 2016, Non communicable diseases (NCDs) kills 41 million people each year, equivalent to 71% of all deaths globally[8]

2. Materials and Methods

2.1 Statement of the Problem

A study to assess the lifestyle practices and awareness regarding lifestyle diseases among adolescent girls in higher secondary schools of Thiruvananthapuram corporation.

2.2 Objectives

Primary objectives
- To assess the lifestyle practices of adolescent girls
- To assess awareness of adolescent girls regarding the lifestyle diseases.

Secondary objectives
To find out the association between awareness regarding lifestyle diseases and lifestyle practices of the adolescent girls

2.3 Operational Definitions

Lifestyle practices

Lifestylepracticesreferstothewayinwhichapersonorgroupofpeoplelivesandworks. In this study, it refers to practices of adolescent girls which includes physical activity, dietary

behavior and sleep habits, which was assessed using self prepared Likert scale.

Awareness regarding lifestyle diseases

In this study, awareness refers to the knowledge of adolescent girls regarding lifestyle diseases, causes, risk factors and prevention of lifestyle disease, assessed using self - prepared questionnaire.

Adolescent girls

The term adolescent girls refers to a young person who is in the transitional phase of growth and development from childhood to adulthood. In this study, adolescent girls refers to girls from higher secondary schools of Thiruvananthapuram corporation studying in 9th, 10th, 11th and 12th standards.

Hypothesis

There is an association between awareness regarding lifestyle diseases and lifestyle practices of the adolescent girls. In view of nature of problem selected and objectives to be accomplished, a quantitative approach was considered as appropriate for the present study. Research designs selected for the present study was cross sectional study, which is used to assess the awareness regarding lifestyle diseases and lifestyle practices of the adolescent girls. The study was conducted in higher secondary schools of Thiruvananthapuram corporation. Data was collected from 330 adolescent girls through online mode. The data obtained were analysed in terms of objectives of the study by using descriptive and inferential statistics. Frequency and percentage distribution was used to describe the socio demographic profile and Chi - square test was used to find the association between level of awareness and selected socio demographic variables.

3. Result

Equal percentage (33.3%) of adolescent girls were from government, aided and private schools. Equal percentage (27.3%) of adolescent girls were from classes of 9th, 10th, 11th and 18.1% girls were from class12th. Out of 330 adolescent girls, 49.7% of girls were Christians, 39.7% were Hindus and 10.6% were Muslims. Most (85.5%) of adolescent girls were non vegetarian. Most (48.8%) of the fathers were private workers, 22.4% working in government sector, 20.3% were businessmen, 8.2% were coolie workers and 0.3% were unemployed. Majority (43.6%) of mothers were homemakers, 30.3% were working in private sector, 13% were in government sector, 12.1% were self employed and 0.9% were coolie workers. Most (73.7%) of the adolescent girls had no history of lifestyle diseases in the family, whereas 26.7% had history of lifestyle diseases in the family. Regarding the type of lifestyle diseases in the family, majority (43.2%) had presence of cancer, 27.2% had diabetes mellitus, 18.2% had heart diseases and 11.3% had hypertension in the family. About unhealthy lifestyle practices in the family, majority (67%) had no unhealthy lifestyle practices in the family whereas 33% had unhealthy lifestyle practices in the family. Regarding the type of unhealthy lifestyle practices in the family, 35.8% had smoking practices, 34.9% had alcohol consumption and 29.4% had fast food culture in the family.

Section II - Lifestyle practices of the adolescent girls

Most (83.9%) of the adolescent girls had moderately healthy lifestyle practices, 15.2%had healthy lifestyle practices and only 0.9% had unhealthy lifestyle practices. Most (77.3%) of the adolescent girls had moderately healthy dietary practices, 20.9%had healthy dietary practices and only 1.8% had unhealthy dietary practices. Regarding type of dietary practices of adolescent girls, 14.8% ate bakery items daily, 27.3% consumed vegetables and fruits daily, 17.6% ate junk foods daily, 19.7% ate fried foods daily, 25.8% drank 2litres of water daily, 25.5% skipped breakfast daily, 31.2% visited cafes, ice cream parlor and restaurants daily and 25.2% ate chocolates, pastries and flavored sweets daily. Most (86.7%) of the adolescent girls had moderately adequate physical activity, 11.2% had adequate physical activity and 2.1% had inadequate physical activity. Regarding type of physical activity, 13.6% of adolescent girls brisk walk for more than30 minutes daily, most (13.3%) of adolescent girls watched television/played video games continuously for more than 2hrs/day, 29.7% did exercises daily, 21.8% played board games continuously for more than 2hrs daily, 28.8% of adolescent girls sit and do their work continuously for more than two hours daily, 28.5% engaged in household chores daily. Most (87.3%) of the adolescent girls had moderately healthy sleep practices, 12.4 % had healthy sleep practices and 0.3% had unhealthy sleep practices. Regarding type of sleep practices, 12.1% of the adolescent girls sleep for more than eight hours daily, 36.4% watched television or play in mobile phones till midnight before sleeping, 29.4% took few minutes of walk before sleeping, 15.5% had daytime naps daily, 43% had one cup of milk before sleeping daily, 22.4% drank tea and coffee daily during night hours, 29.4% had disturbed sleep and 31.5% of adolescent girls sleep during free hours daily.

Section III - Awareness of adolescent girls regarding lifestyle diseases

Majority (57.3%) of the adolescent girls had moderate awareness, 37% of them had poor awareness and only 5.8% had good awareness regarding lifestyle diseases.

Section IV – Association between awareness regarding lifestyle diseases and lifestyle practices of the adolescent girls

The study revealed that there was significant statistical association between awareness regarding lifestyle diseases and lifestyle practices of the adolescent girls. The study found that there was significant statistical association between awareness regarding lifestyle diseases and dietary practices of the adolescent girls. The study inferred that there was significant statistical association between awareness regarding lifestyle diseases and physical activity of the adolescent girls. The study showed that there was significant statistical association between awareness regarding lifestyle diseases and sleep practices of the adolescent girls**.**

Table 1: Distribution of adolescent girls based on lifestyle practices, n=330

Lifestyle Practice	f	%
Healthy	50	15.2
Moderately healthy	277	83.9
Unhealthy	3	0.9

Table 1 depicts that most (83.9%) of the adolescent girls had moderately healthy lifestyle practices, 15.2% had healthy lifestyle practices and only 0.9% had healthy lifestyle practices.

Table 2: Distribution of adolescent girls based on awareness regarding lifestyle diseases, n=330

Awareness	f	%
Good	19	5.8
Moderate	189	57.3
Poor	122	37

Table 2 illustrates that 37% of adolescent girls had poor awareness, most (57.3%) of them had moderate awareness and only 5.8% had good awareness regarding lifestyle diseases.

Table 3: Association between awareness regarding lifestyle diseases and life style practice of the adolescent girls, n= 330

Awareness	lifestyle practice				x^2	p
	Unhealthy		Moderate/healthy			
	f	%	f	%		
Poor	118	42.1	4	8.0	21.22	
Moderate/ Good	162	57.9	46	92.0		p<0.01*

*Significant at 0.05level

Table 3 shows that there is significant statistical association between awareness regarding lifestyle diseases and lifestyle practices of the adolescent girls at the level of 0.05.

4. Discussion

The present study reported that 80.3% of a girls watched television, played video games for more than two hours, 29.7% did exercises more than 20 minutes daily, 58.8% played board games, read books and 28.5% engaged in household chores daily. Similar findings were shown in a cross sectional study conducted among school going adolescents at government and private schools of New Delhi. It shows that though their awareness regarding healthy lifestyle practices was high, only 55% practiced recommended physical activity, 27% of the participants indulged in outdoor games as a mode of recreation and 73% opted for a sedentary mode of either watching TV or playing video games or browsing the net as a mode of recreation.

In this study, the type of dietary practices of adolescent girls were reported as 14.8% ate bakery items daily, 27.3% consumed vegetables and fruits daily, 73.9% ate junk foods occasionally, 17% ate more salty and spicy food daily, 19.7% ate fried foods daily, 25.8% drank 2 litres of water daily, 25.5% skipped breakfast daily and 25.2% ate chocolates, pastries and flavored sweets daily.

This finding is well supported by the findings of the survey conducted by Department of Food and Nutrition in Kerala where 40% of school children skip breakfast due to their busy schedules. However, a cross sectional study conducted among adolescents of Palakkad reported that 82% of adolescent girls did not skipped their meals. A study conducted among adolescent group in selected five districts reported that 56.7% adolescent took carbonated soft drinks at least twice a day, nearly 31.6% had taken junk foods more than three days in a week, this finding is congruent with current findings of the study.

In this study, 12.1% of the adolescent girls reported to sleep for more than eight hours daily and 29.4% had disturbed sleep. A similar cross sectional study conducted among adolescents in Alapuzha district reported that 98.7% got adequate sleep for 8 - 10 hours and 46.6% had sleep disturbances supporting the present findings of the study. The present study showed that that 37% of adolescent girls had inadequate awareness regarding lifestyle diseases. The findings of the study was in congruent with a study done to assess the knowledge and attitude of adolescent regarding healthy diet and exercises reported 67.6% poor knowledge of adolescent regarding lifestyle diseases. Similarly, a study done to knowledge regarding coronary artery disease among adolescents studying in selected schools of Thrissur district, 77.4% had inadequate knowledge regarding coronary artery disease.

A contradictory study conducted to assess awareness regarding non communicable diseases among selected urban school students reported that only 0.5% had inadequate knowledge regarding non communicable diseases.

5. Conclusion

The present study was conducted to assess the lifestyle practices and awareness regarding lifestyle diseases among adolescent girls in Thiruvananthapuram Corporation. The study was conducted among school going adolescent girls studying in selected government, aided and private higher Secondary Schools of Thiruvananthapuram corporation.

The theoretical framework used in the study was Betty Neuman's system model. Review of literature helped the investigator to select suitable design and prepare the tool. The research approach was quantitative and design used was descriptive cross sectional design. A pilot study was conducted and study was found to be feasible. Samples were recruited using stratified cluster sampling technique. The sample for the present study was adolescent girls studying in9th, 10th, 11th and 12th standards of Higher Secondary Schools of Thiruvananthapuram corporation.

Questionnaire and Likert scale respectively were used for assessing awareness regarding lifestyle diseases and lifestyle practices of the adolescent girls. The content validity and reliability of the tool was checked by experts from medical and nursing pediatric department.

After obtaining formal permission from institutional research committee, institutional ethical committee, the data were collected from 27/4/2022 to 12/06/2022 for a period of six weeks. Data was analyzed using descriptive and inferential statistics. The lifestyle practices and awareness regarding lifestyle diseases was expressed in terms of frequency and percentage. Association between lifestyle practices and awareness regarding life style disease was analyzed using chi - square test. Data analysis performed by using SPSS 22.

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