

Survey of Health Related Fitness Knowledge And Stress Level Of Different Professional Women

Sajna Begam¹, Chiranjib Sarkar², S. S. Shinde³

¹MPhil Scholar, Department of Physical Education, Bharati Vidyapeeth Deemed University, Pune, India

²PET, J.N.V. Karimganj, Assam, India

³Associate Professor, Department of Physical Education, Bharati Vidyapeeth Deemed University, Pune, India

Corresponding Author: Sajna Begam

Abstract:

Background: 'Quality of Life' has become one of the major aims of contemporary societies. Although, the term covers a broad range of meanings which differ from country to country or even within the very same society. Health and physical fitness was considered as integral components of quality of life and hence, in this sense, the regular practice of physical activity can be considered as a means to realize both individual and social values.

Purpose: The purpose of this study is to assess the status of of Health related fitness knowledge and Stress level among professional women.

Setting and Design: The subjects taken for this study were 60 females(30 nurses and 30 teachers) from various hospitals and schools of Pune city, age ranging from 25-35 years. Questionnaire was used as a tool for this survey.

Methods: The current study was performed on the survey of health related fitness knowledge and stress level of different professional women of Pune city and to complete this study questionnaire had been given to 60 subjects; the collected data for the study were assessed on the scoring and norms according to the Stress questionnaire and HRFT questionnaire.

Statistical Techniques: Mean and SD were calculated for this survey of health related fitness knowledge and Stress level of different professional women of Pune city.

Result: Nurses were in better situation in both cases of HRFK and Stress level.

Conclusion: Nurses are more status on both health related fitness and stress level knowledge than the teachers are. Hence, nurses are more conscious and they have better knowledge about health related fitness knowledge and stress level than the teachers.

Key Words: Health, Fitness, Knowledge, Stress, Professional.

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I. Introduction

1.1 Background of the study:

In recent years, health professionals have embraced the concept of health promotion through adoption of positive personal health behaviours. If this concept is considered in light of the evidence that links regular exercise to health maintenance, the obvious conclusion is that health-related physical fitness is relevant to all children. The increased recognition of the importance of health-related physical fitness of school children compelled the research scholar to conduct this study. At no time in our history has so much evidence been accumulated to demonstrate the health and wellness benefits of physical activity and fitness. There is no doubt that the public is becoming more aware of the Importance of Physical activity and fitness programmes. Most people believe that regular exercise is important to health and well-being, but yet do not exercise at all. The recent surgeon general's report on physical activity and health is an amazing document summarizing the benefits of regular physical activity and good physical fitness.

The concept of stress, which was firstly defined as "the non-exclusive response of the body to any foreign demand" by Selye (1977), is also defined as the response that occurs in the event of physical and psychological stress brought about by an act or situation on the person. According to Cuceloglu (2002), stress causes individual to exert farther effort beyond his/her physical and psychological limits due to disturbing conditions from the physical and social environment. Therefore, stress has effects of putting the person's well-being in jeopardy, reducing his/her capacity and putting him/her into trouble. Although the concept of stress that has become an inseparable part of everyday life is a subject which is studies excessively in the psychology literature, there is no consensus among researchers about how to define it. The fact that the concept of stress is examined from different perspectives is the most important reason for this. Indeed, in studies carried out on

stress, it is seen that stress is addressed sometimes as a stimulus, sometimes as a reaction and sometimes as a relationship under different models.

1.2 The problem and its social relevance:

Professional women of different industry, schools, and hospitals have different level of health related fitness knowledge and stress according to their work. According the present context, health related fitness knowledge and stress are very common to those who are rightful subject for the professional working women. Different professional women are not conscious about their health related fitness level and therefore suffering in stress level too. Mentally and psychologically thoughts are very essential which will help the clients to serve their needs in their profession. Therefore, health related fitness knowledge and stress level are the main variable, which will lead to cure the major problem of the society of those who are the professional working women in different sectors. So, the present investigation is, therefore, undertaken to find out the “**Survey of Health related fitness knowledge and stress level of different professional women**”.

II. Method

2.1 Subjects: The present study was conducted on a maximum of 60 professional women (30 nurses and 30 teachers) from various schools and hospitals from Pune city and their ages were between 25-35 years.

2.2 Variables of the study: The variables for the present study are as under-

- ❖ Health related fitness knowledge.
- ❖ Stress level.

2.3 Tool used: A standard questionnaire for the following variables are:

- **Stress Level:** Stress questionnaire by the International stress management association (ISMA).
- **Health Related Fitness Knowledge:** HRFT Questionnaire by Dr. T.K Bera.

2.4 Procedure: A total number of 60 female subjects (30 nurses and 30 teachers) were selected randomly from various hospitals and schools of Pune city to conduct the test. The test was conducted through the questionnaire on both nurses and teachers. They were given the questionnaire separately and thus the data were collected.

III. Results

The detailed analysis of the data is presented in this chapter. The data collected from the subject were arranged in a tabular form and to find out the Health related fitness knowledge and stress level status of the teacher and nurse. Mean and SD were calculated to find out the overall value. The entire analysis of the data was done based on the objective of the study. The data were obtained by administrating “Health related fitness knowledge and stress level questionnaire” followed by its norms to the subject. The scores were obtained by using the key as suggested by the authors of the questionnaires.

3.1 Findings: The statistical results of the Survey of health related fitness knowledge and stress level of nurses and teachers have been presented in tables 1 & 2.

TABLE-01
STATUS OF THE HEALTH RELATED FITNESS KNOWLEDGE OF NURSES AND TEACHERS

GROUP	NO.	MEAN	SD
Teachers	30	52.53	6.63
Nurses	30	52.8	11.34

The above table shows the mean of the HRFK of Teachers (52.53) and Nurses (52.80), standard deviations (6.63 & 11.34) and DF (58). Since the Mean of the nurses are slightly greater than mean of the teachers, there is slightly difference between the Health related fitness knowledge of Nurses and Teachers. Nurse’s HRFK is slightly better than Teacher’s HRFK.

GRAPHICAL REPRESENTATION OF THE HEALTH RELATED FITNESS KNOWLEDGE OF NURSES AND TEACHERS

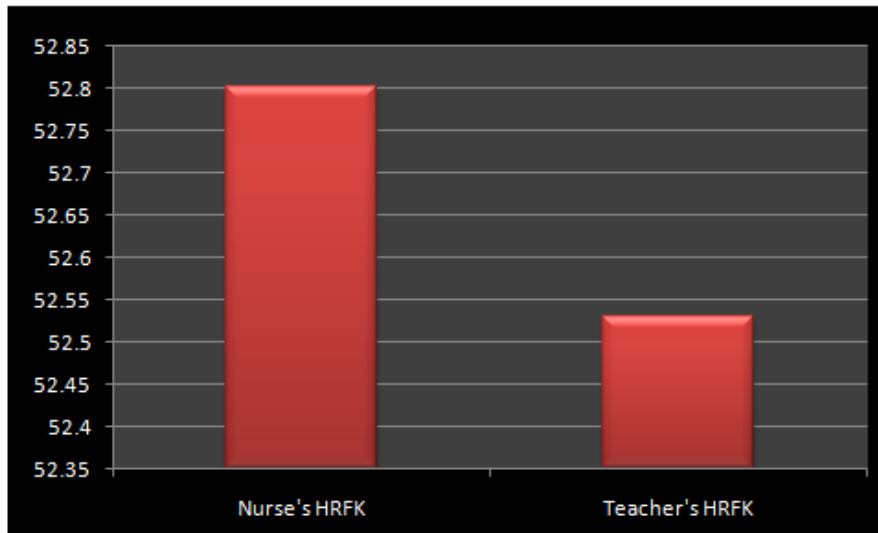


Figure-01

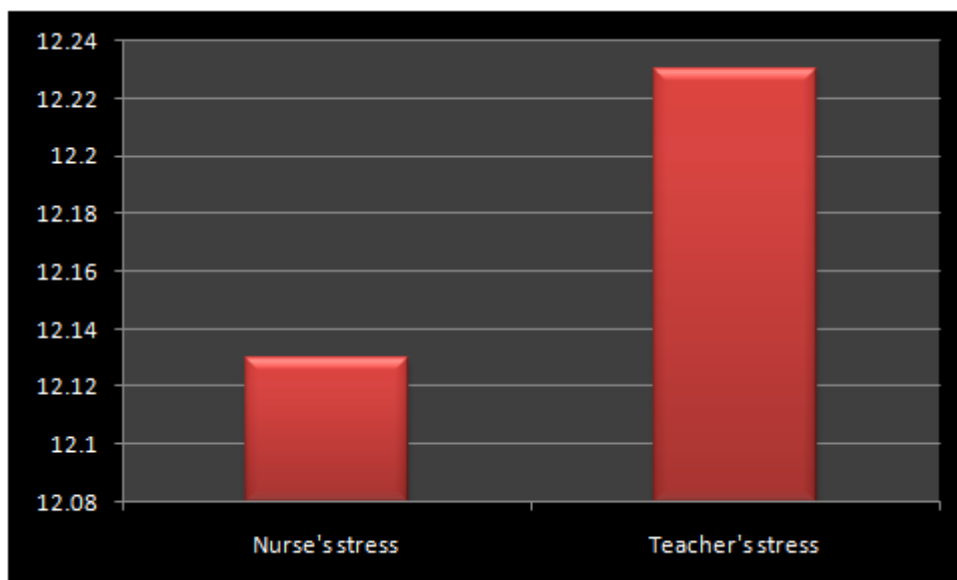
**TABLE-02
STATUS OF THE STRESS LEVEL OF NURSES AND TEACHERS**

GROUP	NO.	MEAN	SD
Teachers	30	12.23	3.45
Nurses	30	12.13	4.04

The above table shows the mean of the Stress level of Teachers (12.23) and Nurses (12.13), standard deviations (3.45 & 4.04) and DF (58). Since the Mean of the nurses are slightly lower than mean of the teachers, there is slightly difference between the Stress level of Nurses and Teachers. Nurse's Stress level is slightly better than Teacher's Stress level.

GRAPHICAL REPRESENTATION OF THE STRESS LEVEL OF NURSES AND TEACHERS

Figure-02



3.2 Discussion of findings

The study took an attempt on the Survey of health related fitness knowledge and stress level of nurses and teachers. The main purpose of this study was to check the health related fitness knowledge and stress level variables at a limited and certain level.

From the comparison of Health related fitness knowledge of Teachers and nurses the researcher found that the mean of teachers was (52.53) and the mean of nurses was (52.80), hence there was slightly difference of HRFK between nurses and teachers. The nurses have better knowledge of HRFK than the teachers. From the comparison of stress level of the teachers and nurses the researcher found that the mean of teachers was (12.23) and the mean of nurses was (12.13), hence there was slightly difference of stress level between teachers and nurses. The nurses are suffering from low stress level than the teachers.

IV. Conclusion

On the basis of findings of the present study, the following conclusions are drawn:

- The study reveals that the status of Health related fitness knowledge and Stress level of different professional women of Pune city. Nurses were in better situation in both cases of HRFK and Stress level.
- In case of HRFK the mean of teachers and nurses were 52.53 & 52.80. Nurses are in better situation than teachers.
- In case of Stress level the mean of teachers and nurses were 12.23 & 12.13. Nurses have low stress level than teachers.
- The appearance of this type of results of teachers may be due to daily hectic schedule in the school. Hence, all the teachers should be aware of health related fitness knowledge so that they can reduce the level of stress in their daily busy life.

Bennie JA et.al (2017) examined that the sources of practice knowledge fitness trainers use to inform their training methods and update knowledge. This study aims to describe sources of practice knowledge among Australian fitness trainers. Respondents reported the frequency of use of eight sources of practice knowledge (e.g. fitnessmagazines, academic texts). In a separate survey, exercise science experts (n = 27) ranked each source as either (1) 'high-quality' or (2) 'low-quality'. Proportions of users of 'high-quality' sources were calculated across demographic (age, sex) and fitness industry-related characteristics (qualification, setting, role). A multivariate logistic regression analysis assessed the odds of being classified as a user of high-quality sources, adjusting for demographic and fitness industry-related factors. Out of 1185 fitness trainers (response rate = 13.0%), aged 17-72 years, 47.6% (95% CI, 44.7-50.4%) were classified as frequent users of high-quality sources of practice knowledge. In the adjusted analysis, compared to trainers aged 17-26 years, those aged ≥ 61 years (OR, 2.15; 95% CI, 1.05-4.38) and 40-50 years (OR, 1.54; 95% CI, 1.02-2.31) were more likely to be classified as a user of high-quality sources. When compared to trainers working in large centres, those working in outdoor settings (OR, 1.81; 95% CI, 1.23-2.65) and medium centres (OR, 1.59; 95% CI, 1.12-2.29) were more likely to be classified as users of high-quality sources. Our findings suggest that efforts should be made to improve the quality of knowledge acquisition among Australian fitness trainers.

Bermejo-Cantarero A. et.al (2017) suggested that Health related quality of life (HRQoL) is a subjective, multidimensional and changing over time construct. When HRQoL is decreased, a child is less likely to be able to develop normally and mature into a healthy adult. Physical inactivity is a priority public health problem. Evidence suggests how even moderate levels of physical activity or high fitness levels are associated with benefits for the health in children and adolescents. The aims of this systematic review are to examine the evidence about the relationship between physical activity, sedentary behavior, and fitness with HRQoL, and estimate the effects of interventions that have tested the effectiveness of the increase of the physical activity, the improvement of the physical fitness or the avoidance of sedentary behaviors in HRQoL in healthy subjects aged under 18 years old. This systematic review and meta-analysis protocol was conducted following the preferred reporting items for systematic review and meta-analysis protocols (PRISMA-P) statement. To identify relevant studies, the following electronic databases will be searched: MEDLINE, EMBASE, Cochrane Database, Web of Science, and PEDro. Reference lists of relevant studies will be examined for links to potential related articles. The methodological quality of the observational included studies will be scored using a quality assessment checklist. For the intervention studies, the risk of bias will be estimated using The Cochrane Collaboration tool for assessing risk of bias. Reviewers will determine whether a meta-analysis is possible when data have been extracted. If it is, subgroup analyses will be carried out by age and socioeconomic status, and by the different dimensions of the HRQoL. If is not possible, a descriptive analysis will be conducted. To our knowledge, this systematic review and meta-analysis will be the first that synthesizes the existing results about the relationship between physical activity, sedentary behavior, physical fitness, and HRQoL, and the effect of physical activity interventions on HRQoL, in healthy subjects under 18 years old. This study will clarify this relationship and will provide evidence for decision-making.

Limitations may include the quality of the selected studies and their characteristics. Only studies published in English and Spanish will be included.

Oliveira A et.al (2017) examined that Group sports interventions have been developed to improve health-related physical fitness of overweight/obese youth. However, its benefits are not systematically documented. This study synthesizes the evidence about the effects of group sports on health-related physical fitness of overweight/obese youth. Pubmed, Web of Knowledge, Scopus, Medline, CINAHL, SportDiscus, and Academic Search Complete were searched in February 2016. Studies assessing the effects of group sports on body composition, cardiorespiratory endurance, muscle strength, flexibility, and neuromotor fitness of overweight/obese youth (aged <18 years) were included. Effect sizes (ES) were calculated with Cohen's d and its 95% confidence intervals (CI). Improvements were found in (i) body composition - percentage of fat body mass (pooled ES = 0.67; 95% CI = 0.24-1.10) and waist circumference (ES = 0.69; P = 0.004); (ii) cardiorespiratory endurance - peak oxygen consumption (pooled ES = 0.53; 95% CI = 0.13-0.92) and (iii) muscle strength - hand grip strength (ES = 0.72; P = 0.003). No significant effects were found for body mass index (pooled ES = 0.27; 95% CI = -0.14 to 0.69), percentage of lean body mass (ES = 0.01; P > 0.05), maximal power output (ES from 0 to 0.06; P > 0.05), sit-and-reach test (pooled ES = 0.26; 95% CI = -0.16 to 0.68) and agility test (ES = 0; P = 0.48). Group sports improve body composition, cardiorespiratory endurance, and hand grip strength of overweight/obese youth. Flexibility and neuromotor fitness do not seem to change following group sports.

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