



THE EFFECTS OF A HEALTH PROMOTION PROGRAM ON HEALTH-PROMOTING BEHAVIORS OF NURSING STUDENTS AT McCORMICK FACULTY OF NURSING, PAYAP UNIVERSITY

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Abstract:

Health promotion is defined as behavior motivated by the desire to increase well-being and actualize human health potential. Nursing student should learn how to achieve good health which is the most important aspect of ones life. In addition, nursing students can be role models of healthy behaviors for their patients. This study was quasi-experimental research. The purpose this of study was to evaluate the effects of a health promotion program on health - promoting behaviors of McCormick nursing students. 32 nursing students of code 53 were assigned into an experimental group, by poor health-promoting behaviors scores test. The intervention program includes 5 activities 1) action meeting 2) social dance 3) nutrition board and game 4) tree talk together 5) laugh therapy. The data were collected using a health-promoting behaviors questionnaires [based on Pender's health promotion model] that developed by researchers. The Reliability was .86 and .83, respectively. The data were analyzed using descriptive statistics and the hypotheses were tested using t-test. The results revealed that the mean health-promoting behaviors scores after the intervention were significantly higher than those before the intervention ($P < .05$). The results provide evidence that the health promotion program is an effective intervention to promote the health-promoting behaviors of McCormick nursing students. This study provides evidence of the effectiveness of the health promotion program in improvement of health-promoting behaviors in nursing students that may provide support for the future health of the nursing profession.

Keywords: health promotion program, health-promoting behaviors, McCormick nursing students

Introduction

Teenage is the period of time for significant and rapid changing. It's the transition from teenage to adult. They are sensitive surrounding by high technology and today's economy, culture rapidly dynamics society. Furthermore some of teenagers are still in the middle of their education. They have to leave their home and family to stay on their own which they needs to have highly responsibility and without any adult closely suggestion. For this reason in the teenage view it is such a massive duty and they can't handle. These determinants influence their health condition for instance tension, fear, despondent neither eating or sleeping. They behave like a child, who want to stay closely with the parents or teacher. These factors are affect their physical such as headache, stomachache, bad temper, aggressive and so on.



The researching from The Health Systems Researching Institute in the topic of Teenager's problem on 2009 found that some of teenage have mental disorder and the largest group 17.92 % is people who have problem about their behavior & emotional quality. (Umporn and Ladda,2010). Therefore, teenage needs to adjust themselves to be suitable and understand how to live in the presents society and learn how to achieve life in the future. On the other hand if they are less capacity in adaptation, they might have a trouble and failure in the last. (Srireaun 2010)

There are several factors that affect the teenage adaptation. Firstly the physical, people who has well-heath and good nutrition will get easily adjust and solve the problem better than disabled people or people lack of nutrition, which be the cause of irritable and weary personality. Finally They feel inferiority complex have no self confident. Secondly Basic personality influence their self-confident, moral behaviors and this factor would help them well in modulation. Thirdly Intelligence and well training education background will lead teenage to know how to make a plan and reasonably thinking. Fourthly Environment, parents, relations, teaches, friends, tradition, culture and economy. Children from well train family, they would be able to create a good relationship with other people. According to today's social and technology dynamics, affecting to the old generation who can not catch up the changing thus it's make a gap of the difference between the old and new generation. From several factors above will participate in promoting even though diminishing their ability in teenage adaptation (Kosol and Lertluck,2008).

McCormick nursing student at Payap University of code 53 is the group of teenage adaptation. They are in the middle of changing from high school student, who have closely teacher and family training most of the time to student in university, who need to learn & adjust themselves into the new environment. Hence the affecting occur to their health & mental side such as tension, fear, drear which leads to mental disorder or suicide. Due to statistic nursing student of code 53 in 2010 health issue from McCormick Faculty of nursing showed that 337 records of sickness student which is 24.54 %. The analysis work sheet of healthy behaviors measuring in Health Promotion subject (SN 172) found that nursing student behaviors for instance lack of good nutrition, have no breakfast, sleep late at night, ride the motorbike without wearing helmet and so on. Accordingly to the research of Ruja Phupaiboon (2006) showed that 33.8% of teenage usually consume fast food, 17.2% often drinking the aerated soft drink which is half of them have not had breakfast. In addition There were teenage who fasten seatbelt while driving, using the crosswalk while crossing the road and wear the helmet when riding were 26%, 38.8 % and 10.9%, respectively. These behaviors can be a determinants affecting of health problem in nursing student.

Health-promoting behaviors are a part of the daily activities of life that impact individual happiness, values and well-being. (Pender et al., 2006) Therefore It's very important for nursing student, who will become health care professionals when they graduate to become a role models of good practice in relation to health promotion and also achieve the programme for their study appropriately. Health-promoting behaviors comprise six components including health responsibility, physical activity, nutrition, interpersonal relations, spiritual growth and stress management (Pender et al., 2006). All these components will implement and bring the truly understanding the knowledge of Health-promoting behaviors and also leads to well-being life (Jeerapa Mahavong,2008) Thus the knowledge is important part to make the truly understanding in health-promoting behaviors. In addition there are several factors could bring the correctly knowledge for example personal factors such as age, income, education, psychology factor, social & culture factor (Pender et al., 2006).

Therefore this study have been created to practicing heath-promoting behaviors to nursing student of code 53 at McCormick Faculty of Nursing, Payap University which has the purpose for produce healthy and well-being in the teenager's adaptation period.

Methodology

The population and group example

The population of this study totaled 129 nursing student of code 53 at McCormick Faculty of Nursing, Payap University. The population will selected by low score collection of the Health-promoting behaviors Questionnaire, then encourage them to be participate in the Health-promoting behaviors practicing programme totaled 32 nursing students.

The research instrument

The research instrument for this study is the health-promoting behavior practicing programme, which include “The 3 Keys to Happiness ” workshop with several activities e.g Learning by doing, distribute brochure, organize and playing game nutrition board game on non toxic food issue, social dancing, sharing in tree talk together activity and laugh therapy activity.

The research instruments for data collecting were done by researcher in order to gather and summarizing the heath-promoting behaviors theory to create the instruments, including 4 sessions

Session 1. Heath-promoting behaviors measuring was develop by the researcher, guide by Ketsara chownahueytakho and Jirapan Chunjarean (2007) total 27 items, including 3 parts of health-promoting behaviors which physical activity (6 items) all the question were positive statement, nutrition (12 items) were both positive and negative statements 6 each and stress management (9 items) the positive statement were 4 questioned and 5 questions were negative statements. The score of response options were 5 rating scales:

statements	Positive statement	Negative
None practicing	0 point	4 points
2-3 times practicing / a week	1 point	3 points
1-2 times practicing / a week	2 points	2 points
3-4 times practicing / a week	3 points	1 point
Everyday practicing	4 points	0 point

Obtained scores of items of each subscale in this session were summed and divided by the total number of items to compute the mean. The mean was categorized into 3 levels of behaviors which similarly to Sarinthip Chawaphanth (2008):

Percentage	Behavior score (4 scores)	Behavior level
0-60	0.00 - 2.00	Poor
61-80	2.01 - 3.00	Moderate
81-100	3.01 - 4.00	Good



Session 2 Perceived benefits of health-promoting behaviors measuring

The research instruments was created by researcher by gathering research information totaled 12 items: 4 items of physical activity, 5 items of nutrition and 3 items of stress management which all of statement were positive. The responses were 5 rating scales: 1 point for disagree, 2 points for moderately disagree, 3 points for moderately agree, 4 points for agree and 5 points for strongly agree.

Session 3 Perceived barriers to practicing health-promoting behaviors measuring

The research instruments was created by researcher by gathering research theory totaled 13 items: 5 items of physical activity, 7 items of nutrition and 1 item of stress management which all of statement were negative. The response were 5 rating scales : 5 points for disagree, 4 points for moderately disagree, 3 points for moderately agree, 2 points for agree and 1 point for strongly agree.

Session 4 Perceived self-efficacy in health-promoting behaviors measuring

The research instruments was created by researcher by gathering research theory totaled 11 items: 4 items of physical activity, 4 items of nutrition and 3 items of stress management which all of statement were negative. The response were 5 rating scales : 1 point for no confidence, 2 points for likely confidence, 3 points for moderately confidence, 4 points for highly confidence and 5 point for the highest confidence.

Obtained scores of items of each subscale (overall) of statements in 2,3 and 4 session were summed and divided by the total number of items to compute the mean. The mean was categorized into 3 levels of behaviors which similarly to Sarinthip Chawaphanth (2008):

Percentage	Perceived score (5 scores)	Perceived level
0-60	0.00 - 3.00	Low
61-80	3.01 - 4.00	Moderate
81-100	4.01 - 5.00	High

The content validity of instruments data collecting was assessed by three experts. The internal validity of this study were 0.86 which similarly to data collecting from 30 nursing students of code 53 at Baroamrachachonnanee Collage in Chiang Mai, Cronbach's alpha reliability coefficients were 0.83.

Data collection was carried out in 3 steps

Step 1 Evaluated before experimental

This study and scholarship were reviewed and approved. Data was collected by gathering complete the questionnaire from McCormick nursing student of code 53. The data analyzed found that health-promoting behaviors were in moderate till low level. All the purpose and benefits were given by oral explanation to 32 nursing student who were selected from low rating score in the questionnaire. They were available and willing to participate in the health-promoting behaviors programme also they were assigned to ensure confidentiality. In addition, evaluating of health-promoting behaviors, perceived benefits, perceived barriers, perceived self-efficacy in health-promoting behaviors were done before they will be participate in the health-promoting behaviors practicing programme.

Step 2 Given health-promoting behaviors practicing programme

1. "The 3 Keys to Happiness" Workshop. This course was 1 hours 30 minutes on 18 August 2012 which run by the expert giving the information and sharing the experiences also distribute some of document necessity. Courses were dividing in 3 parts: Nutrition in part 1 , Exercise in part 2 and Stress in part 3.
2. Nutrition and none toxic food Board setting activity. These activity were represented all the calories and nutrients that the student received in everyday also playing game by answering the question and give them awards. This activity took 1 hour in every Thursday from the first week to sixth week.
3. Social dancing activity was set for 1 hour on every Monday and Thursday from the first week to sixth week.
4. Tree talk together activity During 6 weeks of the programme, student can write their feeling in the paper and attached on the paper tree.
5. Laugh therapy activity was set on Thursday of second, fourth and sixth week around 1 hour/ time.

Step3 Evaluated after experimental

Evaluating total score of health-promoting behaviors, perceived benefits, perceived barriers, perceived self-efficacy in health-promoting behaviors after participated in the health-promoting behaviors practicing programme. Summarized and calculated the data to identify by frequency, average, percentages and Standard Deviation. Then compare the score between before and after the programme by Paired t-test statistic.

Results

1. The results revealed that the participants had overall perceived benefits and self-efficacy of action at a high level (0.5) which compare the score between before and after participated in this programme, whereas perceived barriers had lower score (0.5) after participating showed in Table 1

Table 1 Compares the averages of perceived benefits, perceived barriers, perceived self-efficacy before and after participating (N=31 participants)

Average of acknowledge	\bar{X}	S.D	df	t	Sig.(2-tail.)/2
Perceived benefits					
Before participating	4.37	0.35	30	-2.877	0.003**
After participating	4.56	0.36			
Perceived barriers					
Before participating	3.87	0.53	30	-5.696	0.000**
After participating	3.08	0.75			
Perceived self-efficacy					
Before participating	3.48	0.49	30	-6.144	0.000**
After participating	4.12	0.42			

** P<0.05

2. After student had been participated in the programme found that they had higher level of health-promoting behaviors than before showed in Table 2

Table 2 Number and percentages of health-promoting behaviors before and after participating Experimental

Behaviors Level	Before participating		After participating	
	no.(participants)	Percentages	no.(participants)	Percentages
Low level (0.00-2.00)	25	80.60	3	9.70
Moderate level (2.01-3.00)	6	19.40	24	77.40
High level (3.01-4.00)	0	0.00	4	12.90
Total	31	100.00	31	100.00

3. Student had received overall average of health-promoting behaviors in physical activity, nutrition and stress management at the high level of 0.5 score which higher score than before they participated in the programme showed in Table 3

Table 3 Compares the average of health-promoting behaviors before and after participating

(N =31 participants)

Average	Range	\bar{X}	S.D	df	t	Sig.(2-tail.)/2
Health-promoting behaviors						
Overall						
Before participating	1.83-1.93	1.89	0.13	30	-10.040	0.000**
After participating	2.40-2.69	2.54	0.39			
Physical Activity						
Before participating	1.26-1.56	1.39	0.41	30	-6.947	0.000**
After participating	2.11-2.72	2.36	0.82			
Nutrition						
Before participating	1.95-2.16	2.05	0.29	30	-6.722	0.000**
After participating	2.37-2.66	2.48	0.39			
Stress Management						
Before participating	2.08-2.30	2.19	0.29	30	-7.551	0.000**
After participating	2.66-2.94	2.78	0.38			

** P<0.05



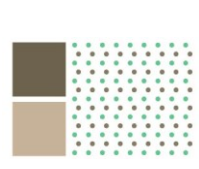
Discussion

The finding provided some crucial implications in developing health promoting behaviors in nursing students at the McCormick Faculty of Nursing, Payap University, though the student has limitations due to the limitation of controlled and uncontrolled populations.

The findings showed that the nursing student had moderate score of health-promoting behaviors. However, the result revealed higher average score of 0.5 for health-promoting, nutrition and stress management among the student. This health-promoting behaviors gave benefit to nursing students in many ways, first they can control themselves in involving in more health activities and develop themselves in a healthier ways. These can be seen from the higher self-efficacy of practicing health-promoting behaviors. In terms of perceive barriers of student health-promoting the finding was in moderate level which is related to the study done by Monticha Nongnoot (2010) and lastly the perceive benefits in student health-promoting was in low level.

These could be back up and explain in accordance with the model of (Pender et al., 2006) that health-promoting behaviors activities is beneficial to all. The activities used in the study includes the acting meeting, social dance, nutrition board game, tree talk together and laugh therapy.

The first activity of acting meeting focused on participation in “The 3 Keys to Happiness” workshop with instructor which emphasized on daily dietary, regular exercise and stress management. This activities mainly help in increasing participation and interaction among students and the instructor to exchanging and sharing information through writing activity. This has helped in creating new idea and knowledge which reflexed the student emotionally Sureerut Rongruang and Somkiat Suknuntapong (2008). Next, nutrition board game, this activity support the knowledge of nutritional facts and calories intake that help reduce obesity. This board game motivates positive changing of student eating behaviors which supported many researcher like Arpaporn Powwattana, Surinton Kalampakorn, Sune Lagampan and Kwanjai Amnatsatsue (2011). whose stated that nutritional facts alone is not enough without motivation, health-promoting behaviors will not be sustain especially perceive benefit that assists student to select the right food that can suit their body the best. The nursing student anticipated that benefits and would pay more attention to their individuals health. Another factor which influence the food selection is media. Both print and motion media have a major roles in eating habit. The researcher therefore incorporated with the state holder of student dormitory to implement the develop personal skills. This activity helps the student in many ways, the stakeholders advice student on all health- promoting behaviors. The third activity is social dace with lyric and music helps in in relaxation and peaceful mind. The student enjoy and feel less stressful. They also develop better physical appearances and can balance their body and mind much better. This is critical explained by Suwaluk Lohakoon (2009). that participant who has satisfaction in social dace can enhance individuals strength, mind and emotion unequally but it depends on level of satisfactions. The forth activities is tree talk together, this activity gave student opportunity in sharing their unhappiness. They wrote their bad feeling on a piece of paper and attached it to a tree. This helps in reducing stress in nursing student very well. Finally, the laugh therapy activity, this activity involved a lot of body organs such as stomach, chest, neck and face. Laughing helps the flow of blood to the brain, so when brain is fresh and active, it can enhance positive thinking because there is no tension or bad feeling. Deep breathing can help in exchanging



the two important gas in our brain, oxygen and carbon dioxide, this helps strengthen the metal, heart and lung to function well. When body function well, the body can digest better which has theory that back this up done by Department of Mental Health, Ministry of Public Health (2011).

Conclusion

Outcome of student health promoting was the outcome process of the programme designed done by the researcher which assist the student to control individuals health habit for better health condition. The research also realized that the heal-promoting is crucial for the nursing student. Because these student needs both theoretical and practical experience. This nursing student needs to have live together in university dormitory and living in the fast pace technology world. If they can not cope with the rapid changing world, they can develop an unhealthy habits. Therefore, a cooperation from stakeholders should rise their awareness and establish the other health-promoting activities so that the student can adapt themselves to current situations. This is a must for all educator and education providers as well as health providers to consider for sustainable quality of life for our future nurses to have good health and be a good workforce in the near future.

Limitations

The researcher selected third year nursing students as the participants in this study. During this study, these participants have 7 course works to study from Monday to Friday and all day from 8:00 am to 5:00 pm, these students only have free time on Thursday from 1:00 pm to 4:00 pm. Which it makes very difficult for the researcher and the student to meet and sometimes the activities have to be postponed.

Implication and Recommendation

Nursing Practice

1. Implement the programme to promote the health promotion for the next McCormick Nursing student.
2. Implement the programme as building healthy policy for health promotion to all Student.

Nursing Research

1. Adapt the health promotion programme by adding and comparing the controlled participant to support the entirely effectiveness programme.
2. Adapt the health promotion programme with students from other faculties.



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