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***Pupil opinions concerning youth health behaviour
in secondary-school***

Zachowania zdrowotne młodzieży w opinii uczniów szkół licealnych

Key words: health, health behaviour, pupils, alcohol, smoking, nutrition

Słowa kluczowe: zdrowie, zachowania zdrowotne, uczniowie, alkohol, palenie, odżywianie

Health behaviour are formed from early years of life. They are influenced by various role models from school, home, local society, religious society. People of the same age and media also tend to play a vital role.

Adolescence, from the perspective of health promotion has major purpose. During youth dynamic development changes take place. They are connected with rapid somatic, emotional, intellectual, sexual and social changes. Concurrently health behaviour of positive or negative saturation appears. The choice of negative attitude may lead to multiple social and health problems of young generation. Youth decides at large extent about the lifestyle and health behaviour in later periods of life. Problematic health behaviours, which appeared during puberty may become a cause of cancer or heart failure and consequently lead to becoming disabled or to premature death. Adolescence, decisions made by young people determine their future, will they become adults with any social health burden or fit.

Many authors researching the problematic of health promotion are unanimous in one aspect. They agree that it is health and its furtherance, support.

In the 70's the main doctrine was that the most vital and effective way of health promotion is health education. This did not meet the expected results. No radical changes had been brought as far as negative aspects such as smoking or poor nutrition were concerned.

Health education ceased to exist as the only wise method of influencing human behaviour on health. In 1974 Lalonde formulated multi-aspect idea of health conditioning. In his conception he assumes that next to man's responsibility for his own health there are also environmental factors (physical and psychosocial – home, family, school) which have major influence on human health. He indicated that numerous factors are out of person's control. Lalonde's health field suggests 4 factors determining health:

- human biology
- environment
- lifestyle
- organization of health care [2, 6].

Lalonde's report indicated that next to health education in health promotion there is also the need to aid educational support to experts, institutions and particular individuals [12]. Important role in health promotion is played in many areas such as education politics, economy, physical culture. Family, health care. Health promotion cannot be connected only with health education, without taking away its dominant purpose [9, 13].

On the current level of medicine health behaviours which condition health preservation are more appreciated. They are the consequence of choice which we make every day. It is not the medical service that is fully responsible for our health condition but mainly lifestyle and decisions made by an individual. Indisputable is the connection between the behaviour of a given person and health, resulting in etiology of illness. Behaviour and health attitude are a part of lifestyle and are responsible for its quality.

The way of belief evolution in health education at school has its beginning in hygienic and health suggestions and ends in 'personality taking care of its health' [35].

What is important, the most vital elements of recent strategy of health education at school are strongly connected with the concept of multidirectional health education elaborated and recommended by WHO, UNESCO and UNICEF. Holistic model of health, utilizing various educational opportunities on the way to support health and simplification of health information gained from school, family, peer group, advertisements, mass media are the main assumptions of recommended conception [15].

A wise idea would be to introduce a new subject based on health education. Its main aim may be:

- youth education on the level of health value,
- developing awareness in ecology,
- life in the family education [3].

An innovative solution worth mentioning is the one from Finland in 2003. For middle schools and secondary schools a new subject called 'Health' has been created. Factors taken into account were increasing pupils' influence on supporting their own health and afterthoughts. There are various health aspects according to puberty, health behaviour, sexual health, etc.

The definition of health and education are strongly connected with each other. Nakajima H. – the director of WHO says that health is an indispensable condition of success at school, economic efficiency and proper lifestyle. By giving young people wisdom, skills and proper attitude towards health we increase their chance for joyful life and increase the possibility to improve health of all society.

In daily life mass media are considered by many to be one of the most important culture providers. They suggest an ideology based on consumption, which favours the ideas of joy and shopping lifestyle. Z. Melosik thinks that its main feature is 'schizophrenicity' based on permanently accelerating the process of 'brand new – old-fashioned'. This factor causes 'consumption insecurity'. The culture of consumption is permanent rush, significant reaction to new commercials, lack of regularity in eating meals, eating fast food every day. It is also an eternal search for joy, creating an image of a man of success as 'good-looking and fit' which leads to influence your body with diets [4]. Mass media have dominated almost the whole youth's spare time in front of the computer or television. Multimedia have a high level of reception that reaches young people through commercials. The main purpose of an ad is to create a sympathy towards the product and take steps in making people purchase the goods. Worth mentioning is the fact that the advertisement usually has a target group. In most cases it is the youth which from economic perspective is an ideal recipient because of their lack of criticism due to the content of such information.

The consumer culture has a wide range of improper behaviours that negatively influence physical and mental development of young people. Z. Melosik indicates the importance of negotiating with youth about reality and own objective choices. In the eyes of Melosik it seems to be a crucial element of upbringing [3, 4].

Puberty is a difficult time for many young people. They have to create their own world, find self-consciousness, show their identity by getting apart from the family. Concurrently, they ought to be aware of the fact that becoming adult is not only fun but also responsibilities. This may lead to tension for which the solution is often sought in smoking, alcohol or drugs. A factor making this condition even more intense is the need to belong to a particular social group. The pressure of those addicted may have influence on others. There are often situations in which teenagers experiment with stimulants out of curiosity or just for fun. This leaves them in good mood, they feel relaxed and under no pressure.

They have a feeling of easing the fear, are in better mental condition which may have been previously influenced by problems at school, in life of family. The main reason for such situation is usually family. Unhealthy relations, crises lead to educative failures and lack of supporting young people needs.

Nicotine is one of the stimulants. Woynarowska B. in her research about risky behaviours suggests that smoking is the most common danger as far as youth

is concerned. This supports the theory that nicotine is the gateway drug – leading to new addictions [17].

Teenagers decide to smoke cigarettes due to various factors:

- problems is contacts with adults
- drinking alcohol
- unsatisfactory grades at school
- lack of happiness, solitude
- need for finding acceptance among other young people [16].

Smoking is considered one of the most serious aspects influencing health. Disquieting is the fact of growing percentage of smoking as far as youth is concerned, also among women. Statistics show that in some cases the mortality of smokers is twice as big as of the non-smokers. It was proven that smoking from early years and permanent addiction lead to more cases of civilization illnesses [5, 7].

Next to nicotine the next gateway drug is alcohol. It is a stimulant which at large extent has influence on mental condition, behaviour and functioning. After consumption alcohol changes mood and conscience. It influences behaviour, way of thinking and moving. Changes blood pressure, increases heart rate, is connected with how brain cells work, stifles the ability to memorize, disables concentration and weakens reflexes. It works negatively on all senses. Young people get easily addicted to alcohol which is a cause of many unwise and risky behaviours caused by wrong estimation of reality [14].

There are multiple cause of youth drinking alcohol. Many people indicate advertisement campaigns which show alcohol as an antidote to everyday problems. Another major influence comes from family and due to genetics. The is a large discrepancy between addiction and occasional drinking. Factors which push young people towards drinking are mainly:

- health problems
- fatigue
- apathy and depression
- conflicts with parents
- low self-esteem
- bad grades at school
- changing a group of friends [11, 8].

In mass media the majority of movie commercials are the ones in which alcohol consumption is associated with adventure, adulthood and manly hood. It helps in fighting fear amongst young people as well as freedom. Beer commercials appearing in every aspect of life strongly influence the consumption and suggest it is the right choice. Numerous breweries create sponsorship campaigns during mass sport events addressed to a young citizen. Concert, music club or discotheque are places where people are told to go and that is where they spend time drinking, reducing everyday pressures and belonging to a particular social group.

Implementing health conscience is indispensable in every period of life. More intensive data should be implemented to children and youth and education should be

more effective. Western Europe and USA introduced health education in their schools a long time ago. Its purpose is to support young people in picking right choices. In Europe we have 'Health promoting schools', in North America 'Comprehensive school health programs'. Their main aim is to increase the level of health education and its preservation and to guarantee social support to young people. It should be emphasized that health programs should play a vital role in internalization of pro-health beliefs. Demel, when writing about Polish health education at school determined it as crucial because:

- school is a mass institution educating whole generations, that is why it is the most proper place to raise society on good terms,
- it is an institution which, through students, spreads the culture of health to older generations, which is no longer educated in such an extent [1].

Health educational program needs to be compatible with the needs of recipients.

Behavioral and lifestyle diagnosis serve as the most important condition of creating appropriate programs. During the last years there have been significant changes in health promotion and education. School is a place where young people are being prepared for adult life, where all future choice according health should be vital. It is an environment which supports health. National Health Program from 1996-2005 predicted active presence of educational resort [18].

The aim of research is to evaluate health behaviour of high school students and to answer which factors influence the formation of such behaviour.

The subject of this research are health behaviours of students for two high schools.

The main research problem is to answer the question: What health and anti-health behaviours are the most recent amongst the youth from high schools based on pupils from Conradinum and Sport School in Gdańsk.

The research tool which was used is a survey. It consisted of closed questions, open questions and half-open questions with the option to choose "others". I have no opinion was also a possibility. In the survey there was an imprinted information on social demographics such as: age, sex, school type, parents' education.

The survey took place at two secondary schools in Gdańsk. Students from the third grade under the supervision of principals of those schools took part in the survey. The opinion poll took place in October 2010 thanks to the educators during advisory class. The pupils had been informed about the aim of research. The survey was anonymous.

In the survey a total of 232 respondents took part, 26 surveys were invalid due to the lack of answers to some questions. There were 206 valid surveys, 117 from Conradinum school and 89 from Sport School.

CHARACTERISTICS OF THE RESEARCHED GROUP

The survey took place amongst third grade high school students. The total number of respondents is 206, Sport School – 89 people which is 43,2% total and 'Conradinum' high school 117 people – 56,8%.

The largest group are 18 year-old students – 83,5%, 6,3% are 19. The third group is 17 year-olds – 5,8%, 16 year-olds 3,9% and one 20 year-old 0,5%.

In the survey there were two identical groups – 103 female and 103 male recipients. The difference in male/female ratio differs between schools: in Sport School 44,9% girls and 55,1% boys, in high school 53,8% girls (63 persons) and 46,2% boys (54 persons).

INTRODUCING AND DEBRIEFING OF SURVEY RESULTS

Eating breakfast before leaving home was declared by 49,5% girls, almost the same number – 50,5% said they do not eat breakfast. There is a larger discrepancy in male group. Eating breakfast before school – 63,1% of boys, when 36,9% say they do not eat any breakfast. There is no significant discrepancy between answers as far as the type of school is concerned. 58,1% of High School students declared eating breakfast. Analogically in Sports School the number was 53,9%. The ‘no’ answer was 41,9% in HS. In SS 46,1% did not eat breakfast.

The biggest group, both girls and boys to the question why they do not eat breakfast responded. I do not have enough time. It is 65,3% girls and 55,6% boys. I am not hungry’ was a response of 22,4% girls and 16,7% boys.

High School students on the question about not eating breakfast mostly answer I do not have enough time. This is a group of 75%. Analogically in Sport School largest group of people give answers. It is 43,2% of the people declaring they do not eat breakfast. Worth mentioning is the fact that 16,2% and 18,9% from this school gives a morning training as a reason which results in waking up very early. Such answer is 35,1%. From the group of girls 57,3% eat second breakfast, 35,9% declares they “sometimes” eat and 7 girls (6,8%) admit they do not eat second breakfast. Boys in the group of 49,5% declare eating second breakfast, when 40,8% says ‘sometimes’ and 9,7% do not eat breakfast at all.

High School students mainly declare to eat lunch. It is a group of 56,4% total. 35% of the total number declare to eat ‘sometimes’ and 8,5% do not eat lunch at all. Majority of the youth from the Sport School declares to eat lunch. It is a group of 49,4%, people who sometimes eat lunch – 42,7% and 7,9% do not eat any lunch. Taking the fact that part of young people don’t eat any breakfast into consideration, this information tends to be alarming.

Dairy is the mostly preferred nutrition group amongst girls – 69,9%. Fruits the second group preferred by female students – declared by 40,8% respondents. Another groups of products that play important part in everyday nutrition are meat – 35,9%, vegetables – 31,1%. What is vital, 21,4% of girls indicated sweets as a cornerstone of everyday diet. Boys on the other side prefer meat as everyday diet – 74,5%. Dairy is the second most important group declared by 59,8%. Vegetables and fruit are vital for 22,5% girls and 23,5% boys. The importance of sweets cannot be omitted. Similarly to girls, 21,6% boys declare that sweets are a basic part in daily nutrition. Moreover, boys mostly prefer fast food when compared to such preferences amongst girls. Such meals are mainly preferred by 5,8% girls and 14,7% boys.

HS students from a group of 73,3% choose dairy as a basis for their nutrition. 51,7% indicate meat. Vegetables and fruit is meaningful for 28,4% and 29,3% of pupils. Sweets are declared by 22,45%. SS students choose meat (59,6%) as a basis.

Dairy is the second largest group declared by the students from this school. 48 people mention it which is 53,9% of all respondents. Fruit are the product mentioned more often than among HS students. It is mentioned by 36,0% students. From 20,2% sweets serve as a cornerstone of nutrition, while 14,6% of SS pupils admitted that fast food is the most recent meal. It is a group of 13 people.

Most boys think that their weight is proper. 65,0% (67 persons) answered this way, on the other side girls in fewer percentage think that they have accurate weigh. It was an answer of 59,4% female students. There is a vast discrepancy in declaring to weigh not enough. This number according to boys is 23,3% and 5,0% girls. Also being overweight and extremely overweight shows discrepancies between gender. The number of girls who feel to be overweight is 31,7% and 11,7% as far as boys are concerned. None of the boys declared to be extremely overweight.

HS students, just like SS students in vast majority think their weight is proper. It is 61,7% and 62,9% pupils. Similar is the number of people who declare to be overweight. In HS it is 20,9% students and in SS - 22,5%. The discrepancies take place between people who see their weight as too low. It is 17,4% students from HS and 10,1% from SS. Boys in larger number declare to be on no diet. That is 89,3% (92 boys), when among girls this number is 75 (72,8%). The amount of students who answered 'YES' is 27,2% girls (28 persons) and 10,7% boys (11 persons).

Similarly looks the number of people not practicing any diet. There are 95 HS students which stands for 81,2% total, when in SS this number is 72, which is 80,9% of people surveyed. Close is the amount of those who tried slim diet, in HS – 18,8% of pupils, in SS 19,1%.

The form of diet is usually restraining from eating too much. It is the most common method amongst students of both SS and HS.

Female part of students the same as the male part declare to eat home-made meals prepared from fresh ingredients. This is 93,1% of girls (95 people) and 92,2% boys, which totals 94 people. Four girls (3,9%) say they eat ready meals, while 3 (2,9%) prefer fast food. Analogically boys declare to consume ready meals - 6,9% and only one (1,0%) prefers fast food.

Girls see their home as the most important source of knowledge, then television. This opinion exists among 56 and 53 female students which is 54,9% and 52%. As far as boys are concerned home is the biggest authority, television is in second place. 51,5% (51 people) and 33,3% (33 people) responded in such manner. Another source of knowledge for girls are people of the same age, school and Internet. For boys, their friends, internet and finally school.

HS Students gain knowledge mainly from home and television. 48,2% and 43,8% of students (49 persons) answered in such manner. Next important aspects are the peer group, internet and school. SS students prefer gaining knowledge at home - 59,6% and TV – 43,8% which gives a number of 49 students.. Next sources are school and peer groups with the same number of 19 people and lastly internet – 13,5% students. Most male and female youth declares to sleep 5 to 7 hours a day. There are 53,4% girls with that opinion which totals 56 people, among boys there are 53 people (52%). 41,7% girls and 37,3% boys sleep between 7 and 9 hours. This is the number of 43

and 38 people. Only 2 girls (1,9%) and 6 boys (5,9%) sleep more than 9 hours. Five hours and less is how 3 girls (2,9%) and 5 boys (4,9%) sleep.

The time during which students sleep is very similar when compared. Most people declare to sleep 5 to 7 hours a day. It is 52,6% HS students and 52,8% SS students.

The next group are young people who sleep 7 – 9 hours. There is a difference among all who declare to sleep less than 5 hours. In HS there are 7 such people (6,0%, at SS only 1 (1,1%).

Male and female youth from both schools decidedly defined relaxing passively as a model of spending free time with the family. 70,2% of young people responded in this manner. It amounts to a group of 144 people who think that family members usually take rest by watching television. Meeting with friends and reading books are next very popular forms of spending free time – 37,1% and 22,4% students. Only 17,1% think that sport activities are popular in their family as a way to spend free time.

Girls, similar to boys mostly prefer spending time with other people of their age, which totals 64,7% girls and 65,7% boys. Spending time in front of a computer is another form of having free time. This group consists of 44 girls and 56 boys. The majority of people who choose sport activities are boys (45,1%) then they prefer television (26,5%) to reading books (18,6%). Girls on the contrary choose watching TV (30,4%) rather than reading books (23,5%) or sport activities (23,5%). Girls declare an average of 8,7 hours spent on sport activities every week, while as far as boys are concerned, this number is 14,3 per week.

HS declare to spend 5,6 hours a week on physical activities, in SS – 18,8 hours. Smoking cigarettes is common among 28,0% female pupils and 33,3% male. 72,0% girls and 66,7% boys do not smoke.

The vast majority of SS students (87,2%) do not smoke cigarettes. 12,8% admit to smoke regularly. In HS 56,0% of respondents are non-smokers and 44,0% are smokers.

Both girls and boys had their first experience with smoking cigarettes at the ages 13 to 15. 59,3% girls and 47,1% boys respond in such manner. There are 7,4% girls (2) and 20,6% boys (7) who were 10 – 12 when they tried the first cigarette. 16 and older is the group of 33,3% girls and 29,4% boys. One boy declares to have smoked his first cigarette before the age of 10.

The reason for smoking and do parents approve it was mainly not cleared by students. Girls and boys think that passive smoking is harmful. 91,3% of female and 84,3% of male students share this opinion. No opinion – 5,8% girls and 13,7% boys. Definitely only a minor part finds passive smoking harmless – 3 girls (2,9%) and 2 boys (2,0%).

All students have similar attitude towards passive smoking. It is a group of 99 HS students (85,3%) and 81 SS students (91,0%). 12,9% of HS students have no opinion, 5,6% from SS. Only two HS students and three SS students think that passive smoking is safe.

The youth declares that 55,4% parents (113) smoke, 91 (44,6%) declare that none of their parents is a smoker.

A group of 87,4% female students drinks alcohol, 12,6% deny to use alcohol. Among boys 94,1% (96) drink and only 5,9% are non-drinkers. 92,2% of HS students drink alcohol, 7,8% response negatively. In SS this number is 88,8% dinking and 11,2% non-drinking. 84,4% girls admit to drink occasionally, analogically to 58,9% boys. 'Once a week' and 'a few times a week' is declared by 15,6% girls and 37,9% boys. Only 3 suggest that they drink alcohol every day.

Both HS and SS students declare to drink alcohol occasionally – it is a group of 79,4% and 60,3% students. 'Once or more than once a week' is said by 18,7% HS and 38,5% SS pupils.. Only 2 students from HS and one from SS say that they drink every day.

A group of 89,3% female and 81,4% male students say that beer is an alcoholic drink, whilst 4,9% had no opinion and 5,8% think that beer is not alcohol. Analogically boys respond to the same question 'yes' in 81,4% cases, no opinion – 11,8% and those who do not see beer as an alcoholic drink is 6,8%.

Respondents in both schools almost identically think that beer is alcohol. It is 84,5% HS students and 86,5% SS students. 6,9% from HS and 4,5% from SS have no opinion and 8,6% HS and 9,0% SS students suggest beer in not an alcoholic drink.

The youth from both sexes and both schools agree that most parents drink alcohol occasionally. This is a group of 90,3%, when 5,3% respond with 'never', and 4,4% says that their parents drink every day.

Girls in a group of 40,8% think that alcohol is available with no constraints. Analogically the same opinion is shared among 48,5% boys. 55,3% female students and 45,6% male students think that sometimes it is a problem to purchase alcohol. Only 3,9% girls and 5,8% boys say that buying alcohol is very problematic.

There is a discrepancy in opinions on accessibility to alcohol by young people. In HS a group of 35,9% think that alcohol is available with no constraints. Analogically in SS 56,2% people give this response. A group of 60,7% HS students sometimes see a problem in purchasing alcohol and 3,4% say it is not possible to buy alcohol. Analogically in SS the numbers are 37,1% and 6,7%. 41,2% of students HS thought positively on classes, 33,3% have no opinion. Negative response – 43,1% students. In SS most responses were positive. It is a group of 55,3% people, 14,4% changed their attitude. Negative response was among 37,5% students.

HS students indicate teacher as a person conducting health prophylaxis classes. 46,0% answer "yes". A competent person from the outside is a tutor for 34,0% students and 20% think that this person is school pedagogue. In SS 69,9% think it is the pedagogue, 21,4% respond teacher and 8,9% point someone else.

CONCLUSION

This survey served as an analysis of youth's lifestyle . The main conclusions are:

1. The type of school has no significant influence on abiding the rules of daily hygiene. The discrepancies cover the time spent weekly on sport activities. Sport School respondents tend to spend even thee times as much on physical activities than the ones for High School.

2. High School students regardless of gender tend to smoke more cigarettes than SS students.
3. There is an overuse in alcohol regardless of the type of school. 90% of young people admit to consume alcohol.
4. The main behavioral pattern for most young people may be found at home. Spending free time is influenced by parents.
5. Health education at schools does not meet young people expectations.

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ABSTRACT

Health conducts tend to be increasingly endorsed by medicine as a factor determining our health. The aim of this thesis is to assess health behaviour amongst secondary-school students and the answer to what factors influence the formation of such behaviour. The survey took place in two secondary schools among third grade. One of the most vital aspects forming the choice of behaviours is family. Almost as important is the school, its environment, which mostly influences behaviour formation and has a crucial part in preparing young people to make decisions in adult life, influences the health behaviors. Media is a very influential force, which put strong mark on youth life, and due to lack of criticism young people seem to be a perfect recipient of advertisement content.

STRESZCZENIE

Zachowania zdrowotne obecnie są coraz bardziej doceniane przez medycynę jako czynnik warunkujący nasze zdrowie. Celem pracy jest ocena zachowań zdrowotnych uczniów szkół licealnych a także odpowiedź na pytanie, jakie czynniki wpływają na kształtowanie tych zachowań. Badanie przeprowadzono na terenie dwóch szkół licealnych z trzecich klas. Do najważniejszych czynników kształtujących wybór zachowań należy rodzina. Obok rodziny to szkoła, jej środowisko, które w znaczący sposób wpływa na kształtowanie zachowań, a także pełni główną rolę w przygotowaniu młodych ludzi do podejmowania zadań w dorosłym życiu, wpływa na zachowania zdrowotne. Media są bardzo znacząca siłą, która głęboko przeniknęła w życie młodego człowieka, a poprzez brak krytycyzmu są idealnym odbiorcą treści płynących z reklam.

Artykuł zawiera 30517 znaków ze spacjami