Sources of knowledge about health behaviors in different groups of age

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Abstract

The World Health Organization defines the concept of health as a state of complete physical well-being, mental and social, individual or group must be able to determine and pursue their aspirations, to satisfy needs as well as environmental changes or dealing with it. Health is seen as a vital supply, not and aim of life. Health is also a positive concept, including personal and social resources and opportunities for physical activity, not only the absence of objectively existing illness or disability. Health behaviors are individual behavior of a person, which have an impact on the present and subsequent health. These are the behaviors that in view of modern medical knowledge evoke specific -positive or negative- health consequences in people who perform them. They are both reactions to any situations related to health or habits and targeted action. The aim of the study was to compare the sources of knowledge about health behaviors in the following age groups: 20-25, 35-40, 55-60. In our research, we evaluated the effects of: television, internet, radio, books, magazines, the share of friends and family. As a research technique chosen an anonymous questionnaire. It was carried out among 300 women in 2015. The questionnaire was intended for women living in Lublin province in three age groups: 20-25, 35-40, 55-60 years. The research examined: television, internet, radio, and the share of friends, family, and books and magazines. The results were statistically analyzed. Over
the last 30 years, we observe the increase of the Internet as a source of knowledge about health behaviors, with a simultaneous decrease the importance of television. Impact of family, friends, radio, magazines, and books as a source of knowledge about the health behavior has not changed significantly over the years studied.

Introduction

The World Health Organization defines the concept of health as a state of complete physical well-being, mental and social, individual or group must be able to determine and pursue their aspirations, to satisfy needs as well as environmental changes or dealing with it. Health is seen as a vital supply, not and aim of life. Health is also a positive concept, including personal and social resources and opportunities for physical activity, not only the absence of objectively existing illness or disability [1]. Physical and mental health allows maximum use of their potential. A healthy person is able to quickly adapt to the environment and the vital functions performed with joy and cheerfulness. It can also, in a good way avail their potential so as to be perceived him as a valuable entity, which could actively participate in social life [2]. According to research, the importance of health in the hierarchy of values increases after the age of 25, additionally it is connected with higher education.

Health behaviors are individual behavior of a person, which have an impact on the present and subsequent health. These are the behaviors that in view of modern medical knowledge evoke specific -positive or negative-health consequences in people who perform them. They are both reactions to any situations related to health or habits and targeted action. The impact on the behavior depends on general knowledge about their own health, the influence of culture, environment, constitutional changes and raising the standard of living [3]. Health behaviors appearing in the prevention are associated with health care and prophylaxis of diseases. Health behaviors emerging in the disease have an impact on the general course and treatment. Health behaviors manifested in rehabilitation refer to handicapped, they are related to the effect of rehabilitation and its course. Health behaviors can be divided into the following groups: prohealth and antihealth. Good health can include: physical activity, rational nutrition, positive thinking [4]. Antihealth have a negative impact on health, and interferes with homeostasis of the body. This may have an impact on the future development of the disease and deterioration in overall efficiency. They hinder prevention, early diagnosis of the disease and significantly delay the process of healing and rehabilitation. Antihealth behaviors include: lack of physical activity in relation to excessive static body, dietary mistakes, consumption of tobacco and alcohol or use of drugs.

Aim

The aim of the study was to compare the sources of knowledge about health behaviors in the following age groups: 20-25, 35-40, 55-60. In our research, we evaluated the effects of: television, internet, radio, books, magazines, the share of friends and family.

Research method and group

As a research technique chosen an anonymous questionnaire. It was carried out among 300 women in 2015. The questionnaire was intended for women living in Lublin province in three age groups: 20-25, 35-40, 55-60 years. It has been formulated to evaluate in the best possible way, selected health behavior. It consisted of 9 different closed questions, which concerned education, place of residence and sources of knowledge about health behaviors. Before test, all the respondents were informed about the purpose of these research and voluntary participation in them. In addition, also received information on how to complete the questionnaire. The results were statistically analyzed.
Results

In the youngest group 49% of respondents as a source of knowledge about health uses television, in the intermediate 42%, and 23% of the oldest group. These differences were statistically significant ($\chi^2 = 15.36503$, $p = 0.000$) (Fig. 1).

Internet as a source of health knowledge in the youngest group uses 81% of respondents, in the intermediate 61%, while in the oldest group -3%. These differences were statistically significant ($\chi^2 = 131.4527$, $p = 0.000$) (Fig. 2).

In the youngest group 25% of the respondents as a source of knowledge about health uses a radio, in the intermediate group- 21%, and 27% of respondents in the oldest group. These differences were not statistically significant ($\chi^2 = 1.013$, $p = 0.602$) (Fig. 3).

Another source of information of health behaviors asked about, was the influence of friends. In the youngest group 55% of respondents as a source of knowledge about health uses the friends, in the intermediate group- 35%, and 38% in the oldest group. These differences were not statistically significant ($\chi^2 = 9.511265$, $p = 0.008$) (Fig. 4).

The share of the family as a source of knowledge about health behaviors, confirmed in the youngest group 24% of patients, in intermediate group- 17% and 36% of respondents in the oldest group. These differences were close to statistical significance ($\chi^2 = 9.679111$, $p = 0.007$) (Fig. 5).

In the youngest group 31% of respondents, as a source of knowledge about health using the books, in intermediate group- 35%, and 50% of people in the oldest group. These differences were not statistically significant ($\chi^2 = 8.461394$, $p = 0.014$) (Fig. 6). The magazines as a source of knowledge about health behaviors in the youngest group uses 44% of respondents, in intermediate group- 59%, and 58% of the oldest group. These differences were not statistically significant ($\chi^2 = 5.657$, $p = 0.059$). (Fig. 7)

Discussion

Our research shows that from year to year increases the importance of the Internet as a source of knowledge about health behaviors. This is caused by easy access to the network and increasing early education
Fig. 2
Internet as a source of knowledge about health behaviors.jpg

Fig. 3
Radio as a source of knowledge about health behaviors.jpg
**Fig. 4**
Friends as a source of knowledge about health behaviors

**Fig. 5**
Family as a source of knowledge about health behaviors
Fig. 6
Books as a source of knowledge about health behaviors

Fig. 7
Magazines as a source of knowledge about health behaviors
for children and young people about the skilful use of the Internet. In the oldest group (55-60 years) few amount of people use the Internet in everyday life. This is probably due to the fact that the Internet was introduced in the life of humanity relatively recently. The beginnings of the World Wide Web in Poland dates back to 1990 when we launched the first analog Internet link. In 90 access to Internet was not easy and widespread as it is now.

Probably, the elderly did not have easy access to the Internet, so they can not use it to draw knowledge about health behavior. It is also possible that due to the lack of education in the use of computers and the Internet, could not adequately deal with the use of this source of knowledge. Nowadays, the Internet is the perfect medium of communication, providing fast and easy access to information and services. According to research conducted in 2014 by the Office of Electronic Communications in Poland it shows that 90% of menage have Internet access. The analysis also tells us that access to the network of Polish citizens from year to year is systematically increasing. The universality of the Internet has become an important part of people’s lives, allowing them effective assistance in different spheres of life. Easy access to the Internet provides technological advances, allowing each having a smartphone can use wireless anywhere in the world. Contributed to this also telephone operators who have lowered their proces of Internet broadcasts. Survey research conducted by B. Gugala reported that the Poles use the Internet and medical services in the field of e-health [5]. Nearly half (48.2%) of respondents consider the Web for their own source of information on health, while 23.4% of all respondents to the contrary. The study of the 2012 conducted by Polish Internet Research shows that the Internet is their main source of knowledge in the sphere of health (84% of responses) and the first place to look for information in the event of experiencing health problems (43% of responses). Analysis of foreign researchers also confirm that from year to year the number of people for whom the Internet is a source of knowledge about health behaviors is increasing. The Pew Research Center’s Internet & American Life Project found that 72% of adult US citizens looking for health information online, and for 35% of the respondents constituted a diagnosis tool in case of feeling discomfort. Internet as a source of knowledge about health behaviors has many advantages as well as disadvantages [6]. Easy and fast access to the Internet amplified the negative phenomenon, which causes the patients prefer to check on the treatment of their symptoms themselves than to go with this problem to a specialist. Some participants after finding useful knowledge in the network decided not to visit the doctor. At once emerged a group of respondents that can not be separate information reliable from inaccurate, therefore these messages consult during medical visit[7]. Gałuszka in his research said that the Internet has meant that the doctors, who were administrators of knowledge about health, were forced to release it with others.

In our research, see a significant decline in the importance of television as a source of knowledge about health behaviors. Probably this is due to rejection of the TV for the Internet. Research carried out by Polish Internet Research (PBI) in 2011 shows that in order to acquire information on health, disease or treatment, Poles most often used the Internet. The second source of knowledge in this area were doctors and health professionals (73%) at the third television (56%). In a study conducted by Szymczuk et al., 80.2% of respondents said that knowledge about health drew on the media, including 44.7% the Internet and 31.7% the from satellite. The Web is now the medium that contains a lot of information, which can also be found watching TV. Acquiring knowledge about the health behavior of television in the oldest age group is significantly higher than in the youngest group. This is probably due to the fact that older people spend more time at home and in his free time watching TV. Some of them can not use a computer or the Internet, so choose television. Younger people, often spend a lot of time away from home, do not have such broad access to television. They can use the Internet outside the home, thanks to smartphones. Younger, being away from home, without access to television often seek health information on the Internet [8].

Magazines and books are also a great source of information about health behaviors. The use of these sources associated with the efforts to get to these
resources [9]. Currently also the source of knowledge about health displaces the Internet. Today, most magazines publishes its numbers on the web. Book content can also be found on the network or in audiobooks.

Family and friends are also a source of knowledge about health behaviors [10]. In this analysis, we observe a declining trend, which is likely due to a decrease maintaining a close contact with his close family or friends. Moreover, during socializing, talks about health behaviors are rarely preferred. It should also draw attention to the problems of shyness and reluctance to share their experiences on specific individuals or conditions. Nonetheless, some people make a positive contribution to increasing the knowledge of others about health behaviors. Friends and family based on their own experiences provide knowledge on the promotion of healthy lifestyles, avoiding abuse and encourage daily physical activity.

Should therefore endeavor to create a professional website containing full information concerning risk factors, health status, and simultaneously activate the medical community in the field of health education of people and verify their knowledge of the harmful factors to health are derived from other sources. The awareness of the health risks resulting from lifestyle can be a decisive factor for the implementation of health behavior [11].

**Results**

1. Over the last 30 years, we observe the increase of the Internet as a source of knowledge about health behaviors, with a simultaneous decrease the importance of television.
2. Impact of family, friends, radio, magazines, and books as a source of knowledge about the health behavior has not changed significantly over the years studied.

**References**