

# Evaluation of health promotion activities in nurses

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**ABSTRACT: Introduction:** One of the most important measures of health promoting behaviors as determinants of health are the underlying cause of many diseases, not having known and Health promotion and disease prevention are related directly to these behaviors. Six important part of promoting healthy lifestyles, including relationships between individual responsibility for health, spiritual development, stress management, nutrition and physical activity. Given the importance of learned behaviors on quality of life, this study Promotion of life health behaviors style in nezam mafi hospital nurses, Shoosh Daniel in 2014. **Methods and Materials:** This cross-sectional study on 97 nurses working in Nezam mafi hospital in the city of Shusha, who had been selected as the census was conducted. Data collection was collected with HPLP2 standardized questionnaire that validated and reliabilited questionnaire (90% using Cronbach's alpha) was examined and approved by university professors, Spss 18 was used to analyze the data. **Results:** The mean scores of health-promoting behaviors was 124/5 with a standard deviation of 22/3. All six components of health promoting behaviors and health promoting behaviors were positively correlated. The greatest component of inter personal relationships 2/85±0/62 and the lowest mean corresponds to the components of physical activity with 1/97±0/51, respectively. In addition, health promotion behaviors with any of the demographic variables including age, sex, etc. there was no significant association. **Conclusions:** The degree of compliance with health-promoting behaviors in higher levels of samples were sometimes more frequently. Seems to make a difference in the health promoting behaviors of nurses, have direct impact to patients and the public health, It also requires proper planning at the macro level of health.

**Keywords:** health promoting behaviors, nurse.

## INTRODUCTION

Health promotion and public health is one of the most important factors in social development. Health professionals who previously had focused on disease treatment, now they are considering prevention and health by improving lifestyle and eliminating factors that have a negative impact on public health. In addition, health promotion, including facilitating the use of energy and potential of people, quality of improved life, being productive and using the abilities of a person in terms of health (1).

Considering this principle that human resource is the most valuable source of the collection of health and care resources, the importance of human resources' standards, especially in the field of health and care, that has a great variety in the field of human resources, is so significant. The great cost that human resources assign to themselves in governing the hospitals or health centers has shown the need for inspection and growing scientific attention to this vital field (2).

In health and care sector, hospitals are as one of the major institutions in providing health services. In health and care, human resources play a key role more than any other factor (3). "Hospitals are certain workplaces that a large number of employees are at the risk of physical and psychological exposure during their clinical tasks. Despite the

existence of laws in the workplace, many of the exposures and risk situations, are inevitable. It's crucial for hospitals to benefit from health promotion policy. Based on our current knowledge about the importance of lifestyle factors related to the treatment and prognosis of diseases, all hospitals must develop policy, consulting services, training and support of health promotion as an integrated part the course of a person's disease and staff. The impact of health promotion policy in hospitals is based upon descriptive studies and in this area a low level of evidence is available(4)."

"In addition, hospitals are dangerous workplaces of physical threats (like contacting with biological, chemical, and nuclear agents) mental (like stress and night shifts), and social (including night shifts as a factor in social life, and conflicts). Working conditions has the immediate impact on health that in this situation it should be dealt with and hospitals organizations are responsible for these effects and must use these three strategies to improve the health of the employees. The hospital can provide Individual or group services to protect their employees against occupational disease and enable them for the management of diseases and health promotion (4).

"Hospitals should improve the health of their patients and staff to guarantee the financial basis of their work and attract and retain their health and medical staff. Providing health promotion strategies associated with the society would increase the competitive advantages of a hospital. In order to support the development of health promotion services in hospitals, its better integration with organizational and cultural structure of a hospital is necessary. The World Health Organization has stated that the use of ideas, values, and standards of health care in the organizational structure and culture of the hospital, is the main objective of the International Network of Health Promoting Hospitals (5). Working in the hospital (treatment, care and support services) not only affects the health of patients, but also the health of the service providers. This has been proven to work well in Occupational medicine. Value added health promotion is the attention of the staff to control their own health indicators in the working processes. And therefore, it requires the empowerment of the employees by managers and management of business processes, improving health promotion and professional behaviors (6).

Nurses are the largest group of service providers in the health system that can affect the quality of the provided health care and nursing quality can directly affect the efficiency of the health system. On the other hand, organizations and health care centers cannot succeed without efficient nursing staff (7).

"Health promotion and public health is one of the development pillars of the societies. According to Pender health promoting behaviors include any action to increase the preservation of health and prosperity of a person or a place. Health professionals who previously focused on the cure, now their attention is on the prevention and health care by improving lifestyle, including nutrition, physical activity, stress management, responsibilities for health and spiritual growth as well as the elimination of factors that have a negative impact on the human health. Health-related behavior promotion, lead to maintain the performance and independence of the people and increase their quality of life and reduce health care costs. 53 percent of deaths linked to their individual lifestyle and non-health behavior (8). Since health promoting behaviors, like the rest of behaviors are educable it seems that they should be taught from schools, in this regard, the World Health Organization by providing health promoting schools initiative, emphasized the importance of this issue . Now that the system of treatment is changing its direction to promotion of health and prevention of disease, nurses and especially community health nurses at the school level can play an important role in training health promoting behaviors and changing wrong behaviors and in prevention of diseases in different periods of life that to achieve these goals, it is important to determine the type of health behaviors in different components and exploring those behaviors (8).

"Heydari and Mohammad Khan Kermanshahi, (2012) quoted Larson, (2008) and Rasmussen, (2006), stated that cognitive factors, obstacles and behavioral skills are as determinants associated with lifestyle behaviors. Also in checking the barriers to a healthy lifestyle in adults, they know the lack of time and the time constraints, lack of energy and motivation and social factors as barriers to physical activity and availability of foods with less nutritional value and mood boost caused by the consumption of these foods and social factors as barriers to Healthy eating. In addition, they introduce job-related factors such as the type of shift and stress as a contributing factor in the development of unusual food habits in nurses who mostly use sugary foods and snacks as a way to cope with their stress (9). Boggosian et al (2011) by investigating the patterns of obesity in nurses and employed midwives referred to the higher prevalence of obesity and weight gain among nurses compared to the general population, so that more than 60 percent of nurses and midwives in the study had weight gain and they found that older nurses and nurses who work full-time are more prone to weight gain and obesity, and this in turn is a factor for appearing chronic diseases and risks associated with the job and is effective to engage in healthy lifestyle behaviors. In his view Job stress can promote unhealthy behaviors or alter endocrine function, and rotation shift and the long working hours also can result in fatigue and the absence of implementation of the preventive lifestyle behaviors.

In Nursing point of view the importance of studying health promoting behaviors and its results could have several reasons, first, because of the effects of job stress on their quality of life, including life satisfaction, physical health, psychological and social stress which are created because of emotional pressure and are related to the stressful

aspects of job and also because of the broad implications that this behavior creates in organizations and workplaces. In this sense health promotion behaviors can affect their job performance and thus threaten the health of patients and community health. Physical and mental health of the nurses is effective in satisfaction of the patients and quality of nursing care, so having high physical and mental health is by having a better life and inhibition of job stress. However, knowing and paying attention to health promotion behaviors in life and healthy feeling of these employees, definitely affect job performance and life of these nurses and the community, and is of the factors affecting the sustainability and improvement of the performance of workers in the country's health care system. According to what was mentioned above, it was realized that at Nezame Maffi hospital in the city of Shush Daniel, health promoting behaviors of the nurses in the hospital should be considered.

## MATERIALS AND METHODS

### *Methods*

This study is quantitative and of correlation research that assesses the relationship among the variables. In the study the dimension of the health promoting behaviors among employed nurses at Nezame Maffi hospital in the city of Shush, Daniel (including six dimensions: health responsibility, physical activity, nutrition, spiritual growth, stress management and interpersonal relationships) as well as the relationship among these behaviors with demographic variables, have been studied. In this study, all employed nurses at Nezame Maffi hospital in the city of Shush, Daniel, were taken as the research community and the employed nurses at the time of the study, as the samples of the study. The Nezame Maffi hospital of the city of Shush, Daniel was selected as the environment of the study. In this study, a census method (available) was used as sampling, so that 115 nurses were selected as the study population. From among these, 6 were on vacations and at the end 109 nurses were selected as the sample. The criteria to enter the study included having a bachelor's degree in nursing and willingness and informed consent to participate in research and the criteria to exclude the study were the lack of cooperation of study samples in response to the questions of the questionnaire during the study, and unwillingness to participate in this study. In this study a two-part questionnaire, including Part I: demographic characteristics (age, gender, number of children, marital status, employment status, housing status, blood pressure, the workplace, work experience, BMI, abdominal circumference, smoking and income), and in the second part, the questionnaire of improving health assessment (HPLPII), was used to collect data. The questionnaire of improving the health assessment (HPLPII) consists of 52 questions which is classified by Likert scale and includes options of never (1) sometimes (2) often (3) and always (4). This questionnaire conducts "health promoting lifestyle" based on "Pender health promoting model" to determine the extent of promoting health behaviors. This questionnaire measures health promoting lifestyle through focusing initiative acts and perception of the individual, which acts in order to maintain or increase health level, self-fulfillment and personal satisfaction. This questionnaire provides a multidimensional tool for health promotion behaviors, so that measures the frequency of using health promoting behaviors in six dimensions of (health accountability, physical activity, nutrition, spiritual growth, stress management and interpersonal relationships). Total score of health promoting behaviors range from 52-208 and for each dimension a separate score is calculated (11). To confirm the reliability of the content, the instruments and the questionnaires were delivered to the professors and faculty members of the Nursing University of Khorasgan Branch and their suggestions were applied. Then, inter-rater reliability of the questionnaire was estimated to be 0.90 using Cronbach's alpha coefficient. To conduct this study, the data was collected through field data collection and the collected data was analyzed through spss software version 18. In addition, in order to gather information after receiving a referral from the Nursing and Midwifery department of Isfahan Islamic Azad University to carry out the research in Nezam Mafi hospital of Shoosh Daniel city, and was presented to the President and security of the Hospital. After the confirmation of the president and security of the hospital, we referred to the manager of the nursing hospital and a list of the number of nurses in each department during the investigation was prepared. From the whole 115 nurses at the hospital, 6 nurses were on vacation. The researcher prepared 120 questionnaires and referred to different parts of the hospital in the early hours of different shifts during 3 days. In the first stage after the stating the aims of the study and receiving oral informed consent from the subjects, the questionnaire were delivered to them. The researcher was present next to the subjects and was answering to their questions. From among 109 questionnaires distributed among nurses working in the hospital, 97 questionnaires which were returned to the researcher, were completed and were analyzed. To describe the data in this study, the statistical indices of mean, standard deviation, minimum and maximum scores were used and for analyzing the data the Pearson correlation coefficient and independent t test were used. This study had some limitations that knowing them the researcher tried to minimize their impact. As the questionnaires were completed as self-report, it may be influenced by individual attitudes and working conditions. In this field, the researcher tried control this limitation through providing adequate explanations and the required opportunity to the study subjects.

### RESULTS AND DISCUSSION

In this study, the distribution of the subjects were stated in sex and age. The obtained results indicated that the mean age of the study samples is  $35.48 \pm 6.21$  years (males  $39.5 \pm 6.89$  and female  $34.91 \pm 5.93$  years). Also 86.7% of the subjects were female and the rest were men. 83.7% of the subjects are employed and most of the study subjects are 73 married participants (75.2%). Most subjects have 2 children. 80.6% of the subjects are living in the city, the majority of patients (25.6%) are working in the emergency ward and most subjects have a work experience of more than 10 years (47.4%). This is while a work experience of less than 2 years working in the emergency ward (with a frequency of 62.5%) has the highest frequency, 2-10 years of work experience (with a frequency of 27.9%) in the surgical ward and a work experience of more than 10 years (with a frequency of 19.6%) in the emergency ward. The highest number of shifts are 26-30 shifts in a month and the majority of subjects with a frequency of 58.3% have an income proportional to the costs of the same number of shifts. The mean BMI of the subjects is  $23.08 \pm 3.19$  (male  $32.51 \pm 2.53$  and female  $23.07 \pm 3.33$ ). Average abdominal circumference of the subjects is  $84.3 \pm 10.1$  (males  $58.8 \pm 7.1$  cm and females  $48 \pm 10.7$  cm). The average blood pressure of the studied males and females were  $11.33 \pm 1$  and  $11.39 \pm 1.06$  cm Hg, respectively. 95.6 percent of the subjects do not smoke and only 4.4% of them smoke. The average score related to health promoting behavior was obtained as  $124.5 \pm 22.3$  in this study, which represents health promoting behavior "sometimes or often". The independent t-test indicated that there is no significant relationship between health promoting behavior and sex. Also the mean score related to spiritual growth was 21.5 with a standard deviation of 4.05, mean score of spiritual growth  $25.38 \pm 4.44$ , the average score related to the health accountability  $22 \pm 4.85$ , the mean score for physical activity  $24.9 \pm 5.9$ , and the mean score related to nutrition was  $22.38 \pm 4.66$ , mean score related to interpersonal relationships was  $24.9 \pm 5.9$  and the mean score of stress management is obtained as  $18.3 \pm 4.44$  all of which came to represent "sometimes or often". Table (1) indicates the relationship between health promoting behavior and its dimensions in the study subjects. As this table indicates, every 6 dimension of health promoting behaviors have a strong positive correlation with health promoting behaviors, and their relationships are significant. Table (2) indicates the relationship between health promoting behaviors and demographic variables in the study subjects. As this table indicates, there is no significant relationship between the health promoting behaviors and demographic characteristics, and health promoting behaviors are not associated with any of the demographic variables (such as gender, age, marital status, number of children, the workplace, work experience, abdominal circumference, smoking, BMI, employment status, housing status and blood pressure) ( $p < 0.05$ ).

Table 1. the correlation of promoting healthy behaviors and its dimensions in nurses

Health promoting activities	Health promoting behaviors		
	Pearson Coefficient	Significance level	Frequency
Spiritual growth	0.764	0.000	97
Responsibility Health	0.796	0.000	97
Physical activity	0.612	0.000	97
Nutrition	0.630	0.000	97
Interpersonal relationships	0.812	0.000	97
Stress Management	0.820	0.000	97

Table 2. the correlation between health promoting behaviors and demographic variables

	Health promoting behaviors		
	Correlation	Significance level	Frequency
Sex	0.068	0/607	97
Marital status	- 0.094	0/407	97
Number of children	- 0.037	0/777	97
Employment status	0.076	0/573	97
Location Status	0.052	0/701	97
Age	- 0.096	0/488	97
Pressure	- 0.005	0/926	97
The workplace	0/043	0/736	97
Experience	- 0.024	0/861	97
BMI	0.113	0/445	97
Abdominal circumference	0.024	0/895	97
Smoking	- 0.050	0/716	97
Income	0.163	0/229	97

## CONCLUSION

The results of this study indicated that all the six components of health promoting behaviors were positively correlated with health promoting behaviors. The highest mean was related to the components of nutrition and interpersonal relationships and the lowest mean was related to the component of physical activity. In addition, the health promoting behaviors did not have any significant relationship with any of the demographic variables including age, sex and etc. Edrisi, ) (2013) in investigating the health promoting behaviors of nurses working in training hospitals, indicated that there is no significant difference between the scores of health promoting behaviors and demographic characteristics (marital status, type of home, work experience, age and gender) (13). Also, Lee ) (2011) in an investigation of job stress, indicated coping strategies with stress and health promoting behaviors in nurses working in Taiwan, and from among the components of health promoting behaviors with demographic variables, the dimension of physical activity had a significant correlation with age and nutrition with workplace (14). The results of recent research indicates that the domestic researches are consistent with the results obtained from the present study and are inconsistent with the results of the foreign researches. It seems that the cause of these conflicts is the change in social and cultural environment of the working environment for the nurses. In relation to the spiritual growth in nursing, it seems that health in the lives of the nurses causes an improvement in the quality of life in all aspects of life. For this reason, nurse managers need to provide proper operational programs to maintain and strengthen this dimension in nursing. In relation with health accountability in nursing, it should be noted that one of the key priorities of health promotion programs is one of the ways in which nurses can move towards professional excellence, using approaches that encourage individuals to take responsibility for their own health and this will undoubtedly be achieved through increasing the accountability of health. In this study, the mean physical activity score of the nurses has the lowest mean among 6 dimensions of the health promoting behaviors, the decrease in the mean score of the physical activity in comparison to other health dimensions and especially in females can be considered as the lack of the promotion in sports culture in Iranian society on the one hand and inadequate participation of women in sports activities. In general, the level of physical activity has an obvious and inevitable effect on the health of individuals and managers and employers should be aware that a lack of physical activity has a negative impact on the productivity of the employees, and therefore must be included in any program which focuses on health promotion. Edrisi ) (2013) stated in their study that the students who have a constant shift have a better nutritional status than the nurses who are working in shifts. They also stated that nurses who work in constant and nutritional status than have constant shifts and night shifts gave negative effects on nurses' work because it has caused biological changes in eating habits, sleep creates. In this research, the highest score in 6 different areas was gained by nutrition and interpersonal relationships. One of the most important factors in improving the working conditions was the existence of a good and effective interpersonal relationships between the staff that managers should work to improve the environment, especially the nursing environment that has a lot of stress, through good planning. Edrisi ) obtained the mean score of health promoting behaviors of the subjects as  $19.65 \pm 3.74$  which in males and females were as  $20.59 \pm 3.49$  and  $19.42 \pm 3.78$ , respectively. Also Tsai and Liu in their study, obtained the mean score of health promoting behaviors of nurses in the subjects as  $9.90 \pm 2.11$ . Lee ) also obtained the mean score of health promoting behaviors of nurses in their research to be  $2.40 \pm 0.21$ . The results of this study are consistent with the results of the past studies. One of the best ways to promote health which is emphasized today is changing the lifestyle which is one of the most important cases in this area, in addition to diet and exercise, stress management techniques and learning how to do them. This makes the issue to be remarkably important about nursing which is one of the stressful jobs. Also the existence of health promoting behavior in addition to the conducted research leads to the improvement of nurses' life quality and ultimately improve the quality of helping patients in hospitals and this also requires the right policies and appropriate planning sectors. The importance of health promoting behaviors should have not been only a motto and should be involved in the health policies and programs. Lack of planning on health promoting behaviors about nurses is considered as one of the critical challenges of health care which will to serious health, economic and social problems in the future societies in case of lack of follow up.

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