ANALYZING THE LIFESTYLE OF NURSES WHO WORK ON SPECIAL UNITS OF CHABAHAR’S IMAM ALI HOSPITAL IN 2012

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Abstract:

Introduction and objective: Lifestyle is a method that is chosen by person during the life normally and its foundation is designed in the family that is affected by social, economic and occupational situation. Given to the importance of related factors with lifestyle such as work, this study was done with aim to determine lifestyle in nurses who work on special care units.

Procedures and methods: This study was done in descriptive-analytical method and in cross-sectional form over 52 nurses who work on the special units of Chabahar’s Imam Ali hospital in 2016. Data were collected by using standard questionnaire of Miller and Smith in census method and it was analyzed by using descriptive statistical tests, Pearson’s correlation, ANOVA, t.test.

Findings: The results showed that 82.7 percent of them were women and 67.3 percent of them were married. 96.8 percent of them had bachelor’s degree education and 3.8 percent of them had master’s degree. The most participated nurses were ICU nurses. The average score of lifestyle in nurses was 1.19 ± 46.17. There was significant relationship between level of education and score of lifestyle (p=0.015) There was no significant relationship between other variables.

Conclusion: According to the results it was found that lifestyle of nurses is at low vulnerability scope and also vulnerability of nurses with higher education is low and this can be because of increasing of awareness in relation to lifestyle in this group of nurses. Therefore, by holding workshops to train lifestyle, the nurses can be achieved to the best possible level.

Key words: Lifestyle, Nurses, Special units.
**Introduction:** Since the time the persons select nursing field, they entered into the profession in which to service to society and to improve the society’s health is a necessary affair that is related to their lifestyle (1). The lifestyle of a nurse and his or her life situation effects on his or her operation to the patients and it is clear that if a nurse has a proper lifestyle himself, he will able to perform positive and better impact to increase the health level of people (2, 3). The lifestyle of people is affected by several factors such as sex, the structure of family, place of life and economic and social conditions (4) and acceptably it is received by people in their life. (5,6). In fact, the healthy lifestyle means to use of valuable sources to reduce contract or to reduce severe of diseases and damages of them and truly is a method to improve the health and quality of life and adaptability with stress (7). Bourdieu has defined lifestyle as the way of life’s flow and lifestyle of human in personal and group way it means the way to use of income, duration of work’s time, the way of wearing cloths, nutrition, the way of makeup, place of residence, religious and cultural behaviors and the like (8,9). World Health Organization considers the lifestyle as a specific and definable pattern which is achieved by interaction between personal features, social relations, economic and social situations and conditions (10, 11). The most of changes in lifestyle of people has been occurred during twentieth century that includes lifestyles, social relations and health and medical issues (12, 13). Many divisions of lifestyle has been done by scholars, in Feren’s view the lifestyle is divided into three parts includes: activities (like work, entertainment and sport), favorites (like family and media) and beliefs (like social, political and economic subjects) (14). Given that lifestyle can have a great impact on quality of life and prevention of diseases (15), therefore; this study has been done with aim to analyze the lifestyle in nurses who work on special care units of Chabahar’s Imam Ali hospital.

**Procedures and methods:** This study was done in descriptive-analytical method and in cross-sectional form over 52 nurses who work on the special units of Chabahar’s Imam Ali hospital in 2016. Data were collected by using standard questionnaire of Miller and Smith in census method. This questionnaire includes 120 items that each item has 5 answers (1- always 2- often 3- sometimes 4- seldom 5- never) and higher scores indicate unpleasant and unhealthy lifestyle. . For collecting data, after ethical approval of research project in vice chancellor for research of Zahedan’s University of Medical Sciences and receiving letter of recommendation, researcher went to hospital and after coordinating with the hospital security, at first researcher explained the aim of the plan to the staff and after the verbal consent was obtained the questionnaires was distributed. At the beginning of questionnaire to inform people of their consent to participate in this study the text of “your cooperation in this matter means your informed consent to participate in this research. The
information of this questionnaire is also confidential and you will not be faced with any danger” had been written. After completing the questionnaire, the questionnaire was collected by researcher and it was reviewed and if it was imperfect it was returned once again to the nurses and they were asked to complete the relevant sections. Data were analyzed by using descriptive statistical tests, Pearson’s correlation anova, t.test.

Findings: The results showed that 82.7 percent of them were women and 67.3 percent of them were married. 96.8 percent of them had bachelor’s degree education and 3.8 percent of them had master’s degree. The most participated nurses were ICU nurses. The average score of lifestyle in nurses was 1.19 ± 46.17. There was significant relationship between level of education and score of lifestyle (p=0.015) There was no significant relationship between other variables.

Discussion: The results of present study showed that the lifestyle of nurses is at low vulnerability scope. The results obtained from study of Roushan et al. showed that the most percent of research sample’s nurses had rather favorable lifestyle (12, 16). Lifestyle as an indicator of physical health based on whatever that is acceptable to public, it means bilateral relationship of physical and mental health can be predictor of mental health. Studies have shown that lifestyles are placed in relation to mental and physical health status as well as the quality of life (17-19). World Health Organization believes that by changing and reforming of lifestyle, can fight against many of dangerous factors that are considered as the most important factors of death (20). For example, a person deals with good nutrition, regular exercise, avoid from destructive behaviors and narcotic drugs, protection against accidents, on time recognition of symptoms of disease in physical dimension, the control of feelings and thoughts, to cope with stress and problems in spiritual and mental dimension, independency, compatibility and reformation of interpersonal relationships in social dimension. Therefore, according to performed studies the modulation of lifestyle has significant role to control and to reduce the complications of disease and it nearly leads to reduce 50% of early deaths (12). Because, healthy lifestyle behaviors can help to improve of health and unhealthy lifestyle behaviors has harmful impact on health of people. Personal habits and interests of a nurse and his or her life situation is effective to his or her approach to the patient and it is clear that if a nurse himself or herself has a proper lifestyle he or she will get more success to increase people health’s level (2). There are many evidences that physical and mental health is severely influenced by inappropriate work’s condition such as excessive noise, inappropriate light, and inappropriate ventilation. This will cause to job’s dissatisfaction of nurses and it can be one of the effective factors on undesirable lifestyle of nurses (21, 22). Given that lifestyle can have a determinative role to preserve and promote of health and to prevent of diseases and it can strongly effect on health and diseases pattern and in other hand
health is one of the component of lifestyle and lifestyle has a broad concept that includes all aspects of life and, in fact, health is center of quality of life, therefore, it is necessary the behavior’s approaches and danger factors to be considered in healthcare systems along with the clinical assessment and it is suggested to help nurses by holding training courses of importance and the way to promote healthy lifestyle for nurses.

Conclusion: According to the results it was found that lifestyle of nurses is at low vulnerability scope and also vulnerability of nurses with higher education is low and this can be because of increasing of awareness in relation to lifestyle in this group of nurses. Therefore, by holding workshops to train lifestyle, the nurses can be achieved to the best possible level.

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