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RESEARCH ARTICLE
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ASSESSMENT OF KNOWLEDGE AND ATTITUDE REGARDING PATTERN OF HEALTHY LIFESTYLE BEHAVIOR AMONG ADULTS IN (MANDUWALA) DEHRADUN, UTTRAKHAND

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Abstract
Maintaining a healthy lifestyle is crucial for both preventing disease and improving general health. In spite of this, a lot of adults don't know enough about these actions and see them negatively. The purpose of this study was to evaluate people's attitudes and knowledge on the pattern of healthy lifestyle habits. Quantitative research approach with descriptive research design was used to collect data from 150 adults living in Manduwala Dehradun Uttarakhand. Data reveals that majority of 40.6% participants had adequate knowledge regarding pattern of healthy lifestyle behavior and 57.3% participants had moderate knowledge pattern of healthy lifestyle behavior with mean score of 15.58. And majority of the attitude level was moderate among 46% participants regarding pattern of healthy lifestyle behavior and 54% participants had favorable attitude regarding pattern of healthy lifestyle behavior with the mean score of 40.6. The adult age group living in Manduwala Dehradun have less knowledge and have unfavorable attitude regarding pattern of healthy lifestyle behavior. These findings showed the urgency to provide them necessary information regarding healthy lifestyle behavior to change their lifestyle for healthy living and prevention from the disease.

Keywords: Pattern of Healthy Lifestyle Behavior, Knowledge, Attitude & Adults

INTORDUCTION:

Maintaining a healthy lifestyle is crucial for both preventing disease and improving general health. In spite of this, a lot of adults don't know enough about these actions and see them negatively. The purpose of this study was to evaluate adult's attitudes and knowledge on the pattern of healthy lifestyle habits. There are numerous methods to stay well, and if you ask people in your community what they think constitutes a healthy lifestyle, you'll likely get a different response each time. This divide results from the reality that individuals can only access opportunities within their specific socioeconomic and geographic circumstances, and they all make decisions based on their cultural and personal priorities (Cockerham, 2021). Therefore, based on one's own choices, a healthy lifestyle can be defined as a behavioral pattern that promotes health.

So what kinds of behaviors are conducive to good health? In short, they could be any actions associated with both the avoidance of unhealthy habits and positive health outcomes. With so many

options at our disposal, it's important to understand the benefits of good choices and distinguish them from unhealthy ones.

BACKGROUND:

A more recent study examined the health-related habits and outcomes of over 125,000 participants over three decades. According to Li et al. (2018), people who met the researcher's healthy living criteria had a much lower probability of dying young from cancer or cardiovascular disease. However, to what extent can living a healthy lifestyle lower the chance of premature death? This study found that women with healthy behaviors lived an average of fourteen years longer than those with poor lifestyles (Li et al., 2018). Men with healthy lives, on the other hand, lived an average of twelve years longer (Li et al., 2018).

MATERIAL AND METHOD –

Quantitative research approach with descriptive research design was used to conduct the research study in Manduwala Dehradun Uttarakhand. A sample of 150 adults from various socioeconomic backgrounds participated in the study. The simple random sampling was used to recruit the participants in the study. An organized questionnaire and attitude scale was used to gather data, and it asked participants about their attitudes and understanding about healthy living practices. The purpose of the questionnaire was to gauge respondents' knowledge and attitudes on many facets of healthy lifestyle practices, such as exercise, a balanced diet, and stress reduction.

RESULTS

SECTION-1 Description of socio-demographic characteristics of adults regarding pattern of healthy lifestyle behavior.

Table No.1 (a): frequency and percentage distribution of socio-demographic characteristics of adults. **N=150**

S.no	Demographic Variables	Frequency	Percentage
1.	**Age (in years)**		
	17-25	**147**	**98%**
	25-35	3	2%
2.	**Gender**		
	Male	59	39.3%
	Female	**91**	**60.6%**
3.	**Religion**		
	Hindu	**115**	**76.6%**
	Muslim	31	20.6%
	Christian	3	2%
	Others	1	0.6%

Table No.1 (a): Illustrate that maximum 98% of 1st year participants were in the age group of 17-25 years. More than half of 60.6% participants were female. Majority of participants 76.6% belongs to Hindu religion.

Table No.1 (b): frequency and percentage distribution of socio-demographic characteristics of adults**. N=150**

S.no	Demographic variables	Frequency	Percentage
4.	**Education of father**		
	No formal education	21	14%
	Primary education	38	25.3%
	Senior secondary	32	21.3%
	Graduation and above	**59**	**39.3%**
5.	**Education of mother**		
	No formal education	**48**	**32%**

	Primary education	47	31.3%
	Senior secondary	22	14.6%
	Graduation and above	33	22%
6.	**Occupation of father**		
	Self employed	**97**	**64.6%**
	Private employ	32	21.3%
	Government employ	21	14%
7.	**Family income**		
	Rs.5000-15000/-	47	31.3%
	Rs.15001-25000/-	**56**	**37.3%**
	Rs.25001and above	47	31.3%

Table No.1(b): Maximum 39.3% participants father were graduated and majority of 32% participants mothers had no formal education. More than half 64.6% participants father were self-employed. Majority of 37.3% participants had family income between Rs.15001 to 25000/-.

Section-2

Table No.2 (a): frequency and percentage distribution of level of knowledge of adults.

N=150

Aspect	Category	Frequency	Percentage
Poor	0-8	3	2%
Moderate	9-16	**86**	**57.3%**
Adequate	>16	61	40.6%

Table No.2 (a): The table reveals that 40.6% participants had adequate knowledge regarding pattern of healthy lifestyle behavior and 57.3% participants had moderate knowledge regarding pattern of healthy lifestyle behavior.

Table No.2 (b): Mean, Standard deviation of knowledge score of adults.

N=150

Aspect	Statement	Max. score	Mean	SD
Knowledge (N=150)	25	25	15.58	3.809

Table No.2 (b): Reveals that the mean knowledge of adults regarding pattern of healthy lifestyle behavior was 15.58 and standard deviation was 3.809. Hence, it is to be interpreted that adults have adequate knowledge regarding pattern of healthy lifestyle behavior.

Section-3

Table No.3 (a): frequency and percentage distribution of level of attitude of adults.

N=150

Aspect	Category	Frequency	Percentage
Unfavorable	0-20	0	0%
Moderate	21-40	69	46%
Favorable	41-60	**81**	**54%**

Table No.3 (a): The table reveals that the attitude level was moderate among 46% participants regarding pattern of healthy lifestyle behavior and 54% participants had favourable attitude regarding pattern of healthy lifestyle behavior.

Table No.3 (b): Mean, Standard deviation of attitude score of adults.

N=150

Aspect	Statement	Max.score	Mean	SD
Attitude (N=150)	15	60	40.46	3.833

Table No.3 (b): Reveals that the mean attitude of adults regarding pattern of healthy lifestyle behavior was 40.46 and standard deviation was 3.833. Hence, it is to be interpreted that adults have moderate attitude regarding pattern of healthy lifestyle behavior.

Section-4

Table No.4 (a): Association between knowledge score with their selected socio-demographic variables

N=150

S.no	Demographic variables	Below Median < 16	Above Median >16	Chi Square	df	P-value
1.	**Age**					
	17-25 years	87	60	0.878	2	0.644
	25-35 years	1	2			
2.	**Gender**					
	Male	27	30	11.796	2	**0.002***
	Female	60	33			
3.	**Religion**					
	Hindu	72	45			
	Muslim	15	14	4.229	6	0.645
	Christian	1	2			
	Other	0	1			
4.	**Educational status of father**					
	No formal education	11	9			
	Primary education	30	11	6.793	6	0.340
	Senior secondary	17	14			
	Graduation and above	34	24			

Table No.4 (b): Association between knowledge score with their selected socio-demographic variables.

N =150

5.	**Educational status of Mother**					
	No formal education	28	21			
	Primary education	32	14	12.02	6	0.061
	Senior secondary	15	7			
	Graduation and above	15	18			
6.	**Occupation of father**					
	Self-employed	61	36			
	Private employee	18	14	5.413	4	0.247
	Government employee	9	12			
7.	**Family income**					
	Rs. 5,000-15,000/-	30	16			
	Rs. 15,001-25,000/-	37	20	3.638	4	0.457
	Rs. 25,001and above	27	20			
8.	**Family type**					
	Nuclear	34	30			
	Joint	56	26	3.736	4	0.442
	Extended	1	3			
9.	**Dietary pattern**					
	Vegetarian	56	30			
	Non -vegetarian	26	30	11.039	4	0.026
	Eggetarian	6	2			
10.	**Area of residence**					
	Rural	51	41			
	Urban	24	20	2.456	4	0.652
	Semi-Urban	9	5			

Table No.4(a) and (b): The table depicts that there was no significant association found between knowledge score with their selected socio-demographic variables age, religion, educational status of father and mother, occupation of father, income, family type, dietary pattern, area of residence except gender. So it showed that there was no significant association.

***it shows that there is significant association between knowledge score with their selected socio demographic variable gender.**

Table No.5 (a): Association between attitude score with their selected socio-demographic variables.

N=150

S.no	Demographic variables	Below Median < 41	Above Median >41	Chi square	df	P-value
1.	**Age**					
	17-25 years	67	80	0.526	1	0.468
	25-35 years	2	1			
2.	**Gender**					
	Male	23	36	1.928	1	0.165
	Female	46	45			
3.	**Religion**	51	64			
	Hindu	17	14			
	Muslim	1	2	2.147	3	0.542
	Christian	0	1			
	Other					
4.	**Educational status of father**					
	No formal education	9	12			
	Primary education	19	19			
	Senior secondary	11	21	2.627	3	0.452
	Graduation and above	30	29			

Table No.5 (b): Association between attitude score with their selected socio-demographic variables.

N=150

5.	**Educational status of mother**					
	No formal education	22	26			
	Primary education	25	22	1.788	3	0.617
	Senior secondary	9	13			
	Graduation and above	13	20			
6.	**Occupation of father**					
	Self-employed	44	53			
	Private employee	15	17	0.048	2	0.976
	Government employee	10	11			
7.	**Family income**					
	Rs. 5,000-15,000/-	21	26			
	Rs. 15,001-25,000/-	28	28	6.182	2	0.045
	Rs.25,001and above	20	27			
8.	**Family type**					
	Nuclear	28	38			
	Joint	37	43	5.037	2	0.080
	Extended	4	0			
9.	**Dietary pattern**					
	Vegetarian	37	49			
	Non -vegetarian	25	31	5.895	2	0.052
	Eggetarian	7	1			

Table No.5(c): Association between attitude score with their selected socio-demographic variables.
N=150

10.	**Area of residence** Rural Urban Semi-Urban	 46 19 4	 46 25 10	2.445	2	0.294

Table No.5 (a), (b) and (c): The table depicts that there was no significant association found between attitude score with their selected socio-demographic variables age, gender, religion, educational status of father and mother, occupation of father, family income, family type, dietary pattern and area of residence.

DISCUSSION

The results of this study indicate that although individuals have a favorable attitude toward leading healthy lives, they still need to increase their level of knowledge. This suggests that in order to raise adults' knowledge levels, additional education and awareness initiatives are required. The study also emphasizes the necessity of focused treatments to meet the unique requirements of various age groups and socioeconomic backgrounds.

CONCLUSION

In summary, this study offers insightful information about adults' attitudes and understanding regarding healthy lifestyle choices. The results imply that although individuals have a favorable attitude toward leading healthy lives, they still need to increase their level of knowledge. As a result, additional work is required to increase adult understanding and awareness of the significance of adopting healthy lifestyle practices.

CONFLICT OF INTEREST –Author declares no any conflict of interest.

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