

PRO-HEALTH BEHAVIOURS AND BELIEF IN ONESELF AMONG 13-15-YEAR OLD TEENAGERS LIVING IN BIAŁA PODLASKA

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Annotation. The aim of the research was to get information about pro-health behaviours and belief in oneself among 13-15-year old teenagers living in Białą Podlaska. The research included 229 pupils from three Grammar Schools (115 girls and 114 boys). The range of respondents' age varied from 13 to 15 years old. The research tool was two anonymous questionnaires. The first questionnaire contained questions concerning teenagers' belief in themselves and the efficacy of their activities (10 statements). The second questionnaire referred to the pro-health behaviours and it consisted of 14 situations described in the form of multiple choice questions. It was shown that Grammar School goers highly evaluated their own sense of efficacy (31,2 points). Girls (30,39 points) in comparison to boys (32,05) evaluated their efficacy lower by 1,66 points. Grammar School goers in 85,7% of cases choose healthy behaviours and girls are the group which reach for such behaviours more often.

Key words: pro-health behaviours, teenagers, scale of efficacy.

Introduction

The condition level of individual's health as well as the whole society depends on various factors. According to Szilagy-Pagowska (1994) the following factors can be enumerated: healthy behaviours and lifestyle which are tightly related with each other and have bilateral influence.

According to De Vries (1999) healthy behaviours are defined as those which favor own health and/or other people's health, taken up individuals or groups of people' and have a real influence on one's health. Such behaviours include proper eating habits, proper physical activity, personal hygiene and taking care of one's safety. These behaviours are shaped from the early childhood in the process of upbringing and under the influence of many various factors such as: social, material as well as psychological (Woynarowska and co-authors 2000).

Health education plays a significant role in the process of acquiring knowledge and replacing existing behaviours with the desired ones. The results of these changes would be more effective and permanent if people believed more in their own efficacy (Gromulska and co-authors 2009). In other words it is called self-efficacy and according to Bandura (1986) it is the belief of own ability to organize and control own behaviour in order to achieve certain, expected by oneself result of such behaviour. Health behaviours are taken up more willingly as long as people possess a high self-esteem. Thanks to that people believe that all goals are possible to be achieved and that the obstacles and hardships will not prevent them from achieving their goals (Baggozi and co-authors 1998, Schwarzer, de Vries and co-authors 2003, Sandvik and co-authors 2007, Heszen and co-authors 2007).

In connection with aforementioned the aim of the research was to get information about pro-health behaviours and belief in oneself among 13-15-year old teenagers living in Białą Podlaska

Defined in this way major aim of the research requires finding answers to the following questions:

1. What is the evaluation level of efficacy of actions among teenagers living in Białą Podlaska?
2. Do teenagers willingly choose pro-health behaviours?
3. Does evaluation of own efficacy modify pro-health behaviours?

Materials and methods

The research included 229 pupils from three Grammar Schools (Forms IA-III A) among whom there were 115 girls and 114 boys. The range of respondents' age varied from 13 to 15 years old (13,97+/-0,87).

The major research method involves diagnostic poll along with a questionnaire as a research tool. In the research a modified version of Żukowska's questionnaire entitled "I – my health - sport is used (Academy of Physical Education, Warsaw). The questionnaire consists of 14 situations. Among three possible answers a respond should circle this one which is closer to him/her. Every answer was given a specific amount of points and they were divided into three groups – inappropriate – 1 point; neutral – 2 points, and appropriate – 3 points. All the questions concern behaviours and choices having influence on one's health.

The second research method was the scale of average own efficacy – Generalized Self-Efficacy Scale, GSES (Schwarzer, Jerusalem 1992). This scale was adapted to be used in many various countries (Schultz 2002), herein Poland. The authors of Polish version are abovementioned scientists and Zygfryd Juczyński (Juczyński 2001). The scale consists of 10 general statements concerning the questions how to manage different situations in life, how to face up problems as own knowledge about own efficacy. The respondents have to define veracity of these statements from 1-4 scale in which 1 refers to 'no', 2 refers to 'rather no', 3 refers to 'rather yes', and 4 refers to 'yes'.

The vast majority of respondents (40%) are children who come from families in which parents graduated from the university (fig. 1).

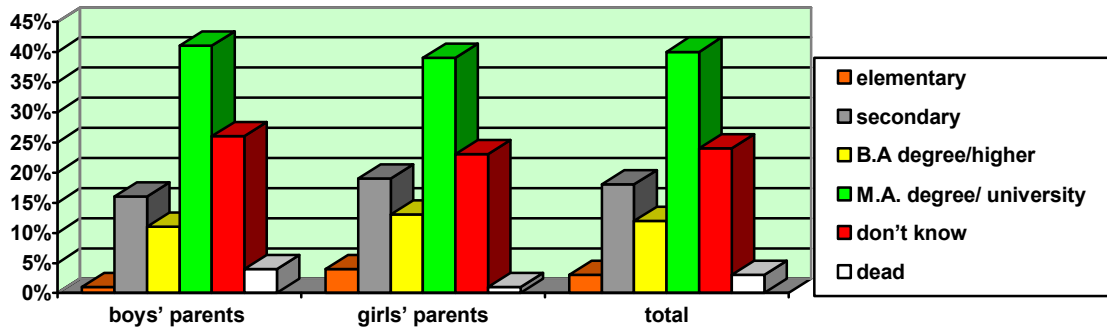


Fig. 1. Education of respondents' parents, n=229

Results

On the basis of the carried out research it has been stated that the level of respondents' knowledge about self-efficacy can be evaluated as satisfactory as on average 84% of respondents circled that a specific situation is rather real or real (marking three or four on the scale). These results make us know that young people are able to cope with hardships which they face up in real life, they are able to solve these problem respecting the second person at the same time.

From the analysis of self-efficacy one can come to conclusion that respondents most often chose the third point on the scale which referred to the answer 'rather yes'. This choice was made by from 45% to 62% of respondents, however, among those were girls more often. Respondents much seldom chose option 'yes'. This answer was chosen by 17% to 43% of respondents. In this case the group of respondents sure in 100% were the boys. In two other groups the number of respondents was low. In case of the answer 'rather no' it varied from 3% to 20%, and in case of the answer referring to 'no' it varied from 1% to 5%.

The average evaluation was higher in case of boys in 90% of cases. That is why in the final conclusion, the results acquired by girls (30,39) was lower than boys (32,05) by 1,66%. The average result in GSES scale in case of both sexes reached 31,2 points (78%)

Among 14 situations which were given in the test one shows that young people do not like and do not want to lose when competing with peers. As many as 38,6% of respondents will not admit to the referee not noticing the mistake and that he has made a mistake. 28,07% of respondents decides to apologies to the opponent after the match what will not change the final result of the game. According to the rules of fair play 33,33% out of 228 of respondents decided to stop the game and the referee about the mistake (table 2).

Table.2. The results of specific choices concerning the observance of Fair Play rules by 13-15-year old teenagers (n=228)

M	F	In total	9. I take part in interschool sport competition. The referee has not noticed the mistake and gave me the point. How would I behave in this situation?
30,97%	35,65%	33,33%	A. I stop the game and say the point should be given to the opponent. I want to win with Fair Play rules.
40,7%	36,52%	38,6%	B. I say nothing. I know that each point gives me certainty to win, and I want to want to win no matter what happens.
28,07%	27,83%	28,07%	C. I do not admit to the mistake, but I decide to apologia to the opponent after the match..

Among the choices made the respondents these were women who chose more often the group of answers defined as model (64,3% of cases).

Adding the answers achieved in situational test which were chosen in majority of cases by the respondents the result of 36 points was acquired out of 42 possible.

Discussion

The statement made by Locke and latham (1990 that the higher the belief in self-efficacy, the higher the aims are set by people and the stronger is their involvement in the desired behaviour is the most relevant, even though there some obstacles and hardships. The belief in own activities has a huge influence on taking up and persistence of pro-health behaviours (Kok and co-authors 1992, Ogińska –Bulik and co-authors 1996, Schwarzem and co-authors 1996).

Using the GSES scale self-efficacy and belief in own teenagers activities were measured. The average result of a single student was 32,2. the achieved results are higher than in case of students participating in the survey

conducted by Rasińska (2010) by 1,46. However, in comparison with the results achieved by Brudnik (2009) in conducted survey on teachers this result was lower by 0,24 (table 3) In all these three surveys males had higher average results. In comparison to older people it shows that teenagers are resourceful, self-confident and full of belief in their activities in regard to faced problem or obstacle.

Table. 3. Average results of GSES scale- of different age groups

Specification	N	Result
Respondents		
Grammar School goers*	229	31,2
girls	115	30,39
boys	114	32,05
Students ***	362	29,74
Females	278	29,32
Males	84	31,11
Teachers **	404	31,44
Females	310	30,87
Males	94	31,91

Source: own research*, Brudnik **(2009) Rasińska *** (2010)

N- number

On the basis of the situational test it can be observed that in the group of the worst answer option, which was chosen by the majority of respondents is only one situation concerning the observance of Fair Play rules. In the group of neutral answers chosen by the majority of respondents were the following situations concerning: lack of criteria while doing the shopping unless they have a list; although having a chronic cold they do not go to the doctor; they choose only going out with friends instead of joining this activity with cleaning the city, they spend additional free time in passive way or performing duties. The third most numerous group contains the correct – proper answers. In this group there are 9 out of 14 situations concerning: healthy motivation to take up sport and coping with failure; absolute care of personal hygiene and teeth, refusing to drink alcohol and smoking cigarettes and making others aware (educating others), taking care of own and others safety while relaxing; getting used to new school environment and spending weekend in appropriate way. Still better choices were made by girls.

Łukasik (2003) in her research observed that in order to raise the feeling of self-efficacy and strengthen the healthy behaviours it is crucial to introduce classes of health education. Sometimes it is lack of knowledge which causes low self-esteem and unwillingness to take some actions.

Conclusions

1. The average result in GSES scale is 31,2 points what gives 78%. It is a high result which means that teenagers can manage difficult situations and they are able to overcome the obstacles faced on the way to achieve their goal. The differences observed between the respondents were slight. Boys achieved the result of 32,05 points and girls were worse by 1,66 points.
2. Yes, teenagers often choose healthy behaviours. Analyzing the situational test teenagers achieved the result of 36 points what gives 85,7%. It is a high result. Pro-health behaviours have been chosen by girls more often.
3. In the survey two research methods have been applied which acquired high results (GSES scale 78% and Situational Test 85,7%). The self-efficacy has probably the influence on permanent and wise decision making in regard to own health.

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