THE FACTORS INFLUENCING KNOWLEDGE, ATTITUDES AND PERFORMANCE ABOUT HEALTH PROMOTING BEHAVIORS OF STUDENTS

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Abstract- The purpose of this research was to analyze factors influencing knowledge, attitudes and performance about health promoting behaviors of students. The result of the study founded that the variable on a self-healthy sense with a mean of health promotion behavior's performance. Difference was significant at the 0.05 level include Food and Nutrition (F=2.94, p=0.02), mental health and stress management (F=4.17, p=0.01), Environment conservation (F=3.07, p=0.02) and for taking care of personal hygiene and disease prevention (F=3.16, p=0.01). The research results had shown the factors influencing knowledge, attitudes and performance about health promoting behaviors of students. The perceptions were individual differences, the differences of perceptions about health promoting may be effect to the behavior in many way. Therefore, the staffs who work about school's nutrition should be plan for health promoting behaviors in food and nutrition, mental health and stress management, environment conservation and for taking care of personal hygiene and disease prevention. Finally, students will be modification the behavior by own self.

Keyword- Health promotion behavior's knowledge, Health promotion behavior's attitude, Health promotion behavior's performance

I. INTRODUCTION

Health promotion behavior, as defined by Health Education Division, Department of Health Service Support under the Ministry of Public Health, is a learning management of factors promoting satisfactory health behavior among families and communities. The social ecological theory is a framework in promoting a community health promotion program. This theory is applied to investigate the connection between happiness and different physical and social environment conditions e.g. abilities to adjust chairs, temperature or even volume. Making a ladder can cause several negative effects on health, for instance, low back pain, stress, fatigue, etc. From the theory, effects on human health are attributed to physical and social environment conditions as well as individuals' internal factors, including heredity, personality deviations, and health protections. These internal factors can directly affect happiness and the relationship with the environment on behavior model influencing on health protections i.e. eating habits, exercises, stress and management. Unfriendliness, sadness, and self-esteem are the results of psychological factors. (Hutchinson & Wilson, 2011)

Health Belief Model has several perceptions of its foundations. (1) Perceived susceptibilityrefers to an individual's perception in disease opportunity. This can be applied to define risk groups and risk levels which depend on one's behaviors. (2) Perceived severity relates to a person's perception in how severe a disease is. This perception evaluates the treatment results (death, disability, and pain) or the social results (effects on career, family and social relationship). (3) Perceived benefits cover a perception in disease protection performance to severity/rise decrease, identifying protection method, place, duration, and expected result. (4) Perceived barriers refer to a perception in estimated expenses or mental conditions which are prohibited by the protection performance. Upon this perception, an individual analyzes the cost effectiveness, comparing to those barriers e.g. expensive cost, side effect, time taking, inconvenience, dissatisfaction, etc. (5) Cues to action involve strategies that stimulate readiness in health protection by giving information about heal protection methods, awareness raising, and reminders. (6) Self-efficacy refers to a perception that shows behaviors in achieving targets, as a result of health protection training. This perception occurs later. (7) Modifying factors consist of factors of knowledge and bio-socio background influencing health perception e.g. background factors (age, sex, race, etc.), psycho-socio factors (personality, social class, social suppress, etc.) and structural factors (knowledge on diseases from exposing to cows, etc.) (Ladda Lenanan & Aim-utcha Wattanaburanon, 2014). Upon the Health Belief Model, people perceive that high blood pressure can cause diseases or life threatening (Perceived susceptibility). It can also lead to cardiac arrest and encephalitis (Perceived severity). Drug use, together with weight losing program, can reduce risk ((Perceived benefits) without side effects or too much difficulty (Perceived barriers). Additionally, printed documents, warning letter, or drug taking calendar may encourage people to regularly follow doctor's instructions (Cue to action). For those who have difficulty losing weight, creating possible short-term target (Self-efficacy) may help them take care of their health continually

and progressively (Karlsson, 2010). These help understand significant factors in relation to students' health promotion behaviors. Staffs who work on students' health promotion behaviors can use the data to plan self-health promotion plan for their students.

The students' health behavior promotion project has been carried out to develop the focus group from the baseline survey of the target community's needs in 2013. The focus group are students in Ongkharak district, which need to take care of the students' health particularly on obesity, tooth decay, pediculosis, and eyesight problems. The project has been collaboratively organized by three organizations: Educational and Psychological Test Bureau, Faculty of Physical Education, and Educational Research Development and Demonstration Institute, Srinakharinwirot University. Fourth year Public Health students from Srinakharinwirot University helped run training workshops at Ongkharak School. The researchers are interested in studying factors influencing on knowledge, attitudes, and health promotion behaviors of the students.

II. OBJECTIVE OF THE STUDY

To analyze factors influencing on knowledge, attitudes and health promotion behaviors of the students.

III. METHODOLOGY

The samples were 266 secondary students from Ongkharak School.

Independent variables were:

- Attending health promotion behavior training refers to the participation in workshops that help build students' knowledge, attitudes and health promotion behaviors to live their lives happily in appropriate environment.
- Feelings to one's health involve opinions of the students' happiness conditions at five levels: very bad, quite bad, quite good, good, and very good.

Dependent variables were knowledge on health promotion behaviors, attitudes on health promotion behaviors and health promotion behavior performance. The mentioned indicators are concluded from related documents and research studies.

The data analyses by means of One-way ANOVA analysis of knowledge, attitudes and health promotion behavior performance. All the six variables, as well as attending health promotion behavior training and feelings to one's heath were analyzed.

IV. RESULTS

The analysis results from comparing averages of knowledge, attitudes, and health promotion behaviors by One-way ANOVA, among all the 6 variables (food and nutrition, exercise, mental health and stress management, environment conservation, individual health protection, drugs, and attending health promotion behavior training) were none, 1-2 times, 3-5 times and more than 5 times. The analysis of the variable on feelings to health was very bad, quite bad, quite good, good and very good.

The analysis results of F-test show that Feelings to one's health is the only variable that the health promotion behavior performance is significantly different at 0.05. Food and nutrition ($F=2.94$, $p=0.02$): the post-hoc analysis indicates that the student who's Feelings to one's health is at good level show higher average value of the health promotion behavior performance than those students at quite good level. Mental health and stress management ($F=4.17$, $p=0.01$): the post-hoc analysis shows that the student who's Feelings to one's health is at good level show higher average value of the health promotion behavior performance than those students at quite good level. Environment conservation ($F=3.07$, $p=0.02$): the post-hoc analysis points out that the students whose Feelings to one's health is at good level show higher average value of the health promotion behavior performance than those students at quite good level. Individual health protection ($F=3.16$, $p=0.01$):the post-hoc analysis shows that the students whose Feelings to one's health is at very good level show higher average value of the health promotion behavior performance than those students at quite good level, as shown in the table below.

The table: The Analysis results of One-way ANOVA on the health promotion behavior performance in different aspects and feelings to one's health

Group	N	$\bar{X}$	SD	แหล่งความแปรปรวน	SS	df	MS	F	p	Post hoc
Food and nutrition										
very bad	2	3.17	1.65	within group	12.49	4.00	3.12	2.94	0.02	good >
quite bad	23	3.16	0.96	between group	268.42	253.00	1.06			quite good
quite good	70	2.94	0.96	all	280.91	257.00				
good	122	3.43	0.98							
very good	41	3.45	1.28	Levene's test: F=2.193						
all	258	3.27	1.05							

Exercises										
very bad	2	3.67	0.00	within group	2.53	4.00	0.63	1.02	0.40	
quite bad	23	3.70	0.70	between group	156.86	253.00	0.62			
quite good	70	3.38	0.87	all	159.39	257.00				
good	122	3.48	0.72							
very good	41	3.62	0.87	Levene's test: F=1.875						
all	258	3.50	0.79							
Mental health and stress management										
very bad	2	4.34	0.94	within group	21.73	4.00	5.43	4.17	0.00	very good >
quite bad	23	3.67	1.03	between group	329.38	253.00	1.30			quite good
quite good	70	3.19	1.23	all	351.11	257.00				
good	122	3.65	1.17							
very good	41	4.06	0.95	Levene's test: F=0.568						
all	258	3.60	1.17							
Environment conservation										
very bad	2	3.84	1.65	within group	14.17	4.00	3.54	3.07	0.02	good >
quite bad	23	3.84	1.12	between group	292.08	253.00	1.15			quite good
quite good	70	3.36	1.27	all	306.25	257.00				
good	122	3.88	0.98							
very good	41	3.91	0.92	Levene's test: F=1.785						
all	258	3.74	1.09							
Individual health protection										
very bad	2	4.17	1.18	within group	15.87	4.00	3.97	3.16	0.01	very good >
quite bad	23	3.90	1.15	between group	317.14	253.00	1.25			quite good
quite good	70	3.65	1.30	all	333.00	257.00				
good	122	4.12	1.07							
very good	41	4.37	0.88	Levene's test: F=1.705						
all	258	4.01	1.14							
Drug use										
very bad	2	3.00	2.83	within group	11.26	4.00	2.81	1.32	0.26	
quite bad	23	4.06	1.20	between group	539.74	253.00	2.13			
quite good	70	3.73	1.49	all	550.99	257.00				
good	122	4.05	1.42							
very good	41	3.58	1.60	Levene's test: F=1.525						
all	258	3.88	1.46							

DISCUSSION

The research findings show that the relationship between variables of feelings to one's health on the health promotion behavior performance is in line with the second research hypothesis. The students that have positive feelings to their health have knowledge, attitudes and health behavior promotion performance better than those who have negative feelings to their health. It is because the feelings to one's health are the health perception of one's health. If they are healthy, it means they have knowledge, attitudes and performance. This is consistent with several research studies conducted by Virachai Jitchot (2005), Orawan Hanchang (2006), Ariya Thongkorn (2007), Yuwadee Bakal (2010), Sureerut Rongruang & Somkiat Suknuntapong (2011), Somchit Nakrapanich, Ratana Puengsema & Kanogwan Suwanpatikorn. (2012), Sompop Boonnasak (2012). These studies indicated that the positive perceptions of health has relationship with health promotion behaviors significantly. It is also true that the perception process is a basic psychological process in perception interpretation, resulting in significant experiences.These perceptions of individuals are derived differently. No one perceives the same thing as others do. When ones perceive stimuli, they can respond to those stimuli by forming an individual experience. Apart from different health perceptions, the perceptions of one's health, both negative and positive, generate the feelings and performance of health behaviors. Further research might involve other factors having effects on health promotion behaviors e.g. the perceptions of health promotion benefits, self-efficacy on health promotion behaviors, perceived barriers in health promotion, information from individuals, social supports, etc. Also, as the research tools of this study were from data collection of various variables, the set questions might not have covered all aspects of health promotion behaviors. Therefore, if the research instruments are developed for each variable e.g. the test of health promotion knowledge or health promotion checklists, other schools can utilize the new developed ones to evaluate or follow up health promotion behaviors.

RECOMMENDATIONS

Recommendations for applications: For attitude promotion on health promotion behaviors, schools should focus on changing attitudes on exercises. They should cultivate their students that doing physical exercises is a significant and regular part of their daily lives. It is due to the fact that, as shown by the research, the students have knowledge on exercises at

very good level. However, their attitudes towards the exercises are at fair level. This can be implied that the school has sufficiently built understanding in doing exercises, but additional activities in promoting attitudes on doing exercises are needed.

Recommendations for further research: further research should cover additional factors influencing on health promotion behaviors, for example, the perceptions of health promotion benefits, self-efficacy on health promotion behaviors, perceived barriers in health promotion, information from individuals, social supports, etc.

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