A Study to Assess the Level of Attitude and Practice Regarding Life Style Modification for Prevention of Cardio Vascular Disease among Students of Selected Colleges Lucknow

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ABSTRACT

"A study to assess the level of attitude and practice regarding life style modification for prevention of cardio vascular disease among students of selected colleges Lucknow.. The aim of the study is to identify the level of attitude and practice regarding life style modification for prevention of cardio vascular disease among students of selected college, to find out the association between attitude regarding life style modification for cardio vascular disease prevention with selected demographic variables of the participants, To find out the association between Practice regarding life style modification for cardio vascular disease prevention with selected demographic variables of the participants. The research approach adopted for this study is a quantitative approach. The research design adopted for this study was a descriptive survey design. The investigator had utilized non-probability convenient sampling for the selection of the subjects. A sample of 100 students from selected colleges who are willing to participate in the study selected for the study. Study revealed that most of the samples are at the age of 18-20 years, most of them are males, majority of them belongs to Hindu religion, most of them are from B.tec 2nd year, most of them are nonvegetarian, belongs to nuclear family, living in urban areas, having family history of cardio vascular disease.

Most of them had positive attitude followed by neutral attitude towards life style modification for prevention of cardio vascular disease. majority of samples had doing good practice followed by average practice towards life style modifications.

Significant positive association between attitude and practice regarding life style modification for prevention of getting cardio vascular disease.

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KEYWORDS: life style modification of cardio vascular disease

Need for the study: -

The number of preventable deaths due to cardiovascular disease has plateaued over the past decade. To learn about how these trends manifested through risk factors among young adults, researchers assessed data collected from 12,924 adults, ages 20-44, between 2009 and 2020.

They found that the number of young adults with high cholesterol decreased from 40.5% to 36.1% during this period. However, the number of young adults with diabetes increased from 3% to 4.1%, while

obesity rates increased from 32.7% to 40.9%. High blood pressure rates, which affect about 1 in 10 young adults, did not significantly change from 2009-2010.

CVDs inflict significant social and economic impacts. According to the Global Burden Disease, Injuries, and Risk Factors Study (GBD) data, the total number of CVD cases and DALY have substantially increased worldwide between 1990 and 2019.

CVDs have been recorded in high-, middle- and low-income countries. However, low- and middle-income

countries lack proper healthcare resources to combat the disease burden.

Therefore, there is an urgent need to develop effective strategies to prevent the incidence of CVDs, particularly in low- and middle-income countries.

In most cases, CVDs appear in middle age and older adulthood; however, in recent decades, there has been an increasing prevalence in younger age groups.

To help younger adults offset risks for having a future heart attack, stroke, or developing heart failure, researchers explained multiple efforts are needed. This includes looking at ways to help young adults, especially those disproportionately affected by heart disease risks, take steps to support their health. Examples noted included ongoing support for community-focused programs, such as blood pressure screenings within barbershops, bringing green spaces to urban environments to support movement, and strengthening efforts to ensure children and young adults have access to health insurance and hearthealthy foods.

By reading all these articles and using the experience of the investigator to understand the current attitude and practice of undergraduate students regarding life style modification to prevent cardio vascular disease the investigator selected this problem statement to in find out the attitude and practice level of arch a life style modification for prevention of cardio undergraduate students regarding life style wascular disease. modification for prevention of cardio vascular disease at selected colleges of Lucknow.

Objectives of the study:

- 1. To identify the level of attitude and practice regarding life style modification for prevention of cardio vascular disease among students of selected college.
- 2. To find out the association between attitude regarding life style modification for the prevention of cardio vascular disease with selected demographic variables of participants.
- 3. To find out the association between practice regarding life style modification for the prevention of cardio vascular disease with selected demographic variables of the participants.
- 4. To find-out the association between attitude and practice regarding life style modification for the prevention of cardio vascular disease.

Material and method: -

Research approach and design: - Descriptive approach with survey design was adopted.

Setting of the study: - Selected college of Lucknow

Study population: - Under graduate students studying at college of Lucknow

Accessible population: - students studying at Selected colleges of Lucknow

Sample size: - 100

Sampling technique: - Non probability convenient sampling technique.

Inclusive criteria:

- 1. The student who are willing to take participation in the survey.
- 2. The students who are undergraduates.
- 3. The students who are available during the period of data collection.
- 4. The students who able to read, understand and filling responses through online mode.

Exclusion criteria

- 1. The students who are not willing to participate in the study.
- 2. The students who attended any training program related to Cardio vascular prevention program.

Variables under study

- 1. Study variable: Attitude and Practice regarding
- 2. Extraneous variable: Age, sex, marital status, religion, educational status, family members in medical field, type of family, type of diet, area of residence, family history of CVD.

Description of Tools

The tool used for the data collection was organized into three sections:

Section – I: Includes 10 items related to the sociodemographic variables of the respondents about Age, sex, marital status, religion, educational status, family members in medical field, type of family, type of diet, area of residence, family history of CVD.

Section – II: likert scale used to assess the attitude of the student towards life style modification for preventing cardio vascular disease. Includes 8 questions to assess the attitude of undergraduate students regarding life style modification for prevention of cardio vascular disease.

Section – III: practice scale used to assess the practice of the student towards life style modification for preventing cardio vascular disease.

Data collection procedure: -

The investigator utilized the convenient sampling technique to select the study subject. Investigator first took permission from principal of selected college and then personally contact telephonically with each respondent, first investigator introduced himself and explained the purpose of the study and ascertained the willingness of the participants. The respondents were assured anonymity and confidentiality of the information provided by them. Investigator send google docs to the participants personal mail id.

Approximately 100 undergraduates participated in the survey.

Limitations of the study

- 1. The study is limited to the persons who are willing to participate.
- 2. The study limited to the undergraduate student who filled google docs regarding life style modification for prevention of cardio vascular disease.
- 3. Sample size is limited to 100.
- 4. Period of study is limited to 4-6 weeks.

Analysis and interpretations

Section I:- Base line characteristics of participants.

Sl. no	Demographic variables	frequency	percentage
	Age in years		
	18-20 years	71	71
1.	21-23 years	28	28
	23-25 years	01	01
	>=26 years	00	00
	Sex		
2.	Male Scientific	81	81
	Female	19	19
	Education qualifications	V)	
	B.Tech 1st year	25	25
3.	B.Tech. 2 nd year International Journal	46	46
	B. Tech 3 rd year of Trend in Scientific	23	23
	B. Tech 4 th year Research and	06	06
	Religious status Development	98	
	Hindu	15	15
4.	Muslim (SSN: 2456-6470)		84
	Christian	9 01	01
	Any others	00	00
	Marital status		
	Married	00	00
5.	Un married	100	100
	Widow	00	00
	Seperated/ divorse	00	00
	Type of family		
6.	Nuclear	54	54
	Joint	33	33
	Extended	13	13
	Area of residence		
7.	Urban	66	66
	Rural	34	34
	Type of diet		
8.	Vegetarian	22	22
	Non-vegetarian	78	78
	Any family history of cardio vascular disease		
9.	Yes	20	20
	No	80	80
	Family members in medical field		
11.	Yes	32	32
	No	68	68

Section II: - Attitude level of participant regarding life style modification for prevention of cardio vascular disease

Table no 2: - Attitude level of participants

Attitude level	Negative	Neutral	Positive	
	00	30	70	

Section III: - Practical level of participant regarding life style modification for prevention of cardio vascular disease

Table no 3: - Practice level of participants

Practice level	Poor	Average	Good
	00	44	56

 $Section \ IV: -correlation \ between \ attitude \ and \ practice \ level \ regarding \ life \ style \ modification \ for prevention \ of \ cardio \ vascular \ disease$

Table no 4: - correlation between attitude and practice level regarding life style modification for

prevention of cardio vascular disease

Sl. no	Attitude vs Practice	r-value	P-value
	Observational cohort	0.303	0.195

The above table shows that there is a positive correlation between attitude and practice regarding life style modifications.

Section V: - Assess the association between attitude score with selected demographic variables.

Table no: - 5 chi square showing association between attitude with selected demographic variables.

Sl.	le no: - 5 chi square showing ass		el of attitu		Obtained	Table	
no	Demographic variables	negative	neutral	positive	value	value	Interference
	Age in years 18-20 years	of0Tren	d in20cie	ntifi51	anc	12.59	NS
1.	21-23 years	0 Res	eargn an	19	2.50		
	23-25 years	0 De/	elopmen	0	B		
	>=26 years	• OSSN	2450-647	0 0	B		
2.	Sex Male	0.0	28	53	4.23	5.99	NS
	Female	0	2	17	4.23		
	Education qualifications B.Tec 1 st year	000		18			
3.	B.Tec. 2 nd year	0	14	32	1.32	12.59	NS
	B. Tec 3 rd year	0	6	17			
	B. Tech 4 th year	0	3	3			
	Religious status Hindu	0	27	57			
4.	Muslim	0	2	13	4.50	12.59	NS
	Christian	0	1	0			
	Any others	0	0	0			
	Marital status Married	0	30	67			
5.	Un married	0	0	0	1.32	12.59	NS
	widow	0	0	0			
	Seperated/ Divorce	0	0	0			
	Type of family Nuclear	0	15	39	1.06	10.50	NG
6.	Joint	0	3	10	1.06	12.59	NS
	Extended	0	12	21			

7.	Area of residence Urban	0	17	49	1.66	5.99	NS
	Rural	0	13	21			
8.	Type of diet Vegetarian	0	6	16	0.10	5.99	NS
	Non-vegetarian	0	24	54			
9.	Any family history of cardio vascular disease Yes	0	9	11	2.67	5.99	NS
	No	0	21	59			
10.	Family members in medical field Yes	0	10	22	0.03	5.99	NS
	No	0	20	48			

S=Significant, NS=not significant. 2=5.99, 4=9.48, 6=12.59.

The chi-square calculation explains that there was no significant association between attitude level and the sociodemographic variables as the chi-square value was less than the table value at 0.05 level of significance. Hence hypotheses 2 was rejected. There was no significant association between attitude level of participant with selected demographic vatiables.

Section V:- Assess the association between practice score with selected demographic variables.

Table no: - 5 chi square showing association between practice with selected demographic variables.

Sl.	ble no: - 5 chi square showing associati		vel of prac		Obtained	Table	
no	Demographic variables	poor	Average	Good	value	value	Interference
	Age in years 18-20 years		in S32enti	ic 39		12.59	NS
11.	21-23 years	R ₀ se	arch ₁₂ nd	16	0.83		
	23-25 years	D ₀ ve	lopment	1 2	B		
	>=26 years	ISSN: 2	456-0470	0.0	B		
	Sex			190	9		
12.	Male		37	44	0.48	5.99	NS
	Female	0	7	12			
	Education qualifications B.Tec 1 st year	077	12	13			
13.	B.Tec. 2 nd year	0	20	26	2.12	12.59	NS
	B. Tec 3 rd year	0	11	12			
	B. Tech 4 th year	0	1	5			
	Religious status Hindu	0	39	45			
14.		0	4	11	3.30	12.59	NS
14.	Christian	0	1	0	3.30	12.39	149
	Any others	0	0	0			
	Marital status						
	Married	0	44	53			
15.		0	0	0	2.40	12.59	NS
100	widow	0	0	3	2.10	12.07	110
	Seperated/ Divorce	0	0	0			
	Type of family	0	21	33			
1.	Nuclear	U	21	33	6.57	12.50	NC
16.	Joint	0	10	3	6.57	12.59	NS
	Extended	0	13	20			

17.	Area of residence Urban	0	30	36	1.69	5.99	NS
	Rural	0	14	20			
18.	Type of diet Vegetarian	0	7	15	1.69	5.99	NS
	Non-vegetarian	0	37	41			
19.	Any family history of cardio vascular disease Yes	0	8	12	0.16	5.99	NS
	No	0	36	44			
20.	Family members in medical field Yes	0	12	20	0.03	5.99	NS
	No	0	32	36	0.03	3.99	

S=Significant, NS=not significant.

2=5.99, 4=9.48, 6=12.59.

The chi-square calculation explains that there was no significant association between practice level and the sociodemographic variables as the chi-square value was less than the table value at 0.05 level of significance. Hence hypotheses rejected. There was no significant association between pretest practice level with selected demographic variables.

Conclusion: -

The result of this study shows that the level of attitude regarding life style modification for the prevention of cardio vascular disease among the participants are neutral attitude and the practice regarding life style modification for the prevention of cardio vascular disease was good among the participant.

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