



P-ISSN: 2394-1685
E-ISSN: 2394-1693
Impact Factor (ISRA): 5.38
IJPESH 2017; 4(3): 433-435
© 2017 IJPESH
www.kheljournal.com
Received: 17-03-2017
Accepted: 18-04-2017

Praveen Singh Jadon
Assistant Professor, KA P.G.
College, Kasganj, Uttar Pradesh,
India

Comparison of health related life style among different Indian professions in relation to alcohol & drug assessment

Praveen Singh Jadon

Abstract

The concept of “lifestyle” is based on the idea that people generally exhibit a recognizable pattern of behaviour in their everyday lives. There are many other studies that suggest deliberately cultivating a positive state of mind can help fight off ill health. Objective: - The purpose of this investigation was to Comparison of Health Related Life Style among Different Indian Professions in Relation to Alcohol & drug Assessment Drug. Method: - 800 males of MP were selected randomly as a subject of study. The age of the subjects were ranged from 30-40 years. Subjects were from different professions each group has 1 subjects. All the contents related to life style were assessed by using life style assessment inventory (LSAI). Results: - ANOVA was used to reveal the significance difference among Different Indian Professions in Relation to Alcohol & drug Assessment. Level of significant was set at 0.05. A significant difference was found among Different Indian Professions in Relation to Alcohol & drug Assessment. Conclusion: - It can be concluded that Alcohol & drug Assessment significantly differs among Different Indian Professions.

Keywords: alcohol, drug

Introduction

The concept of “lifestyle” is based on the idea that people generally exhibit a recognizable pattern of behaviour in their everyday lives. (e.g., regular routines of work, leisure, and social life). A popular 1970's television show, “Lifestyles of the Rich and Famous”, was based on the notion that celebrity and wealth constituted key resources for an interesting and desirable lifestyle. The term “healthy lifestyle” evolved from the idea that people's daily pattern of activities can be judged as healthy or unhealthy. A healthy lifestyle is generally characterized as a “balanced life” in which one makes “wise choices”. However, the array of choices is influenced by many factors. (Renne Lyons and Lynn Langille, April, 2000).

In real life, lifestyle is a product of some combination of choice, chance, and resources. Rutten (1995) offers important distinctions among a number of lifestyle-related concepts: life conditions (resources), life conduct (pattern of behaviors), lifestyle (collective patterns of life conduct), and life chances (structural-based probability of correspondence of lifestyle and life situation). One's sociocultural environment is a very powerful determinant of lifestyle. In fact, Shields (1992) and other sociologists have suggested that lifestyles are essentially artifacts or reflections of culture, individual choice being a less important factor than societal determinants. (Renne Lyons and Lynn Langille April, 2000) Lifestyles are viewed as groupings of commodity consumption involving shared symbolic codes of stylized behavior, adornment, and taste (R. Shields, 1992).

Early discussions of lifestyle centered primarily on nutrition, exercise, smoking, and alcohol use. Programs to improve lifestyle were founded on a belief that information and education would change lifestyles. While revolutionary in its day, our understanding of lifestyle and its relationship to health has evolved substantially since that time. Research and experience in health promotion have changed the way we think about lifestyle and how we work to improve health. (R. Shields, April, 2000).

Over twenty years later, the WHO definition (WHO 1998a) of lifestyle provided a broader understanding of the determinants of a healthy lifestyle. It stated that lifestyle is a way of

Correspondence

Praveen Singh Jadon
Assistant Professor, KA P.G.
College, Kasganj, Uttar Pradesh,
India

living based on identifiable patterns of behaviour which are determined by the interplay between an individual's personal characteristics, social interactions, and socio-economic and environmental living conditions.

Material and Methodology

Selection of Subject

For the purpose of present study 800 males of MP were selected randomly as a subject of study. The age of the subjects were ranged from 30-40 years. Subjects were from different professions i.e. 100 subjects from Doctors, 100 from Engineers, 100 from School Teachers, 100 from College/University Teachers, 100 from Businessman, 100 from Beurocrates, 100 from lawyers and 100 from Police services.

Selection of variables

After gleaning through all the scientific literature, journals, magazines available in the library of Lakshmbai National Institute of Physical Education, (Deemed University), Gwalior, M.P. and keeping feasibility criteria in mind following contents related to life style assessment were selected for the purpose of present study.

Criterion measure

All the contents related to life style were assessed by using

life style assessment inventory (LSA)

Procedure

The individual from various professions were consulted personally and their co-operation was solicited. Respondents were given a questionnaire with necessary instructions. Necessary instructions were passed on to the subjects before providing the questionnaire. The research scholar was motivated the student respondents by promising to send a separate abstract of the conclusions of his study to each of the subjects. Confidentially of responses were guaranteed so that the subject would not camouflage their real feelings. Research scholar was requested for filling the questionnaire as quickly as possible.

Statistical Procedure

Analysis of Variance (ANOVA) was used to see the difference among the different teams of volleyball players at the significant level of .05. For further analysis "Post Hoc Test" (LSD) was applied.

Result

The questionnaire comprised of 42 questions covering various aspects of mental toughness of universities volleyball (men) players. The findings of the present study are presented in the following tables:-

Table 1: Descriptive Statistics of Different Professions in Relation To Alcohol and Drug Assessment

Groups	Count	Sum	Average	Variance
Doctors	100	5999	59.99	28.69687
Engineers	100	4357	43.57	1743.904
School Teachers	100	3926	39.26	39.60848
College/ University Teachers	100	4082	40.82	28.95717
Businessmen	100	7844	78.44	17.15798
Beurocrates	100	6000	60	26.94949
Lawyers	100	4384	43.84	1743.186
Police Services	100	2553	25.53	4.817273

The average and variance of Doctors 59.99±28.69687 Engineers 43.57± 1743.904 School Teachers 39.26±39.60848 College/ University Teachers 40.82±28.95717 Businessmen

78.44± 17.15798Beurocrates 60± 26.94949 Lawyers 43.84± 1743.186 Police Services 25.53± 4.817273 in relation to Alcohol and Drug Assessment

Table 2: Analysis Of Variance of Alcohol and Drug Assessment among Different Individuals Belonging To Different Professions on Their Selected Life Style Assessment Contents

Source of Variation	df	SS	MSS	F-ratio
Between Groups	7	187718.7	26816.96	59.04742*
Within Groups	792	359694.5	454.1597	

* Significant at 0.05 level of confidence
F 0.05 (7, 792) = 2.02

Table – 3 revealed that there was significant difference the individuals belonging to different professions on Alcohol and Drug Assessment, as obtained F-ratio was 59.04742 which was higher value than the value 2.02, required for F-ratio to be significant at 0.05 level with (7,792) degree of freedom.

Since the one way analysis of variance was found significant in relation to Alcohol and drug assessment, the least significant difference (LSD) test was applied to find out which of the differences of the means amongst the different professions were statistically significant.

Table 3: Least Significant Difference Post-Hoc Test for Means of All Professions In Relation To Alcohol and Drug Assessment

Doctors	Engineers	School Teachers	College/ University Teachers	Businessmen	Beuroc-rates	Law-yers	Police services	MD	CD
59.99	43.57							16.42*	5.90
59.99		39.26						20.73*	
59.99			40.82					19.17*	
59.99				78.44				18.45*	
59.99					60			0.01	
59.99						43.84		16.15*	

59.99							25.53	34.56*	
	43.57	39.26						4.31	
	43.57		40.82					2.75	
	43.57			78.44				34.87*	
	43.57				60			16.43*	
	43.57					43.84		0.27	
	43.57						25.53	18.04*	
		39.26	40.82					1.56	
		39.26		78.44				39.18*	
		39.26			60			20.74*	
		39.26				43.84		4.58	
		39.26					25.53	13.73*	
			40.82	78.44				37.62*	
			40.82		60			19.18*	
			40.82			43.84		3.02	
			40.82				25.53	15.29*	
				78.44	60			18.44*	
				78.44		43.84		34.6*	
				78.44			25.53	52.91*	
					60	43.84		16.16*	
					60		25.53	34.47*	
						43.84	25.53	18.31*	

* Significant at .05 level.

It is evident from table -10.1 that mean differences of different profession in relation to Alcohol and Drug Assessment was found to be significant between Doctors and Engineers, Doctors and School Teachers, Doctors and College/University Teachers, Doctors and Businessman, Doctors and Lawyers, Doctors and Police services, Engineers and Businessman, Engineers and Beaucrates, Engineers and Police services, School Teachers and Businessman, School Teachers and Beaucrates, College/University Teachers and Businessman, College/University Teachers and Beaucrates, College/University Teachers and Police services, Businessman and Beaucrates, Businessman and Lawyers, Businessman and Police services, Beaucrates and Lawyers, Beaucrates and Police services, Lawyers and Police services at .05 level of confidence. Mean differences of different profession in relation to Alcohol and Drug Assessment was found to be insignificant between Doctors and Beaucrates, Engineers and School Teachers, Engineers and College/University Teachers, Engineers and and Lawyers, School Teachers and College/University Teachers, School Teachers and Lawyers, School Teachers and Police services, College/University Teachers and Lawyers at .05 level of confidence.

To observe the difference among the individuals belonging to different professions on their selected Life Style Assessment Contents, the analysis of variance was adopted and data pertaining to these have been presented in table I and II.

Discussion

The analysis of data reveals that there were significant difference in alcohol and drug assessment among the different profession individual as calculated F (59.047) were greater than the tabulated F (2.02) respectively. After applying post hoc test as shown in table III it was found that there was significant difference among different professions individuals. As businessmen has the highest mean value (78.44). The significant differences in alcohol and drug assessment in various Professions individuals were probably due to the different nature of mental training and prerequisites components for the individual. Such results may also be due to change in climatic conditions, nature of job and may be due to the work pressure.

References

1. Wayne Creasy Jr. John, Virginia Polytechnic Institute and State University, 2005.
2. Cratley Bryant J. Psychology and Physical Activities, New Jersey: Englewood Cliffs, Prentice Hall, 1968.
3. Gould D, Hodge K, Peterson K, Petlichkoff L. Psychological foundations of coaching: Similarities and differences among intercollegiate wrestling coaches. The Sport Psychologist, 1987; 1:293-308.
4. Orlick Terry, Psychology for Sports, Champaign, I.L. Leisure, 1986.
5. Silva John M, Weinberg Robert S, Psychological Foundation of Sports, Champaign, I.L: Human Kinetic Publishers, 1984.
6. Bull SJ, Shamrock CJ, James W, Brooks JE. Towards and understanding of mental toughness in elite English cricketers. Journal of Applied Sport Psychology, 2005; 17:209-227.
7. Anspaugh David S, Hamrich Michael H, Rosato Frank D. Wellness-Concepts and Application Mosby: Von Halfmon Press Inc, 1994.
8. Green LW, Kreuter MW. Health Promotion Planning: An Educational and Environmental approach (3rd ed.). Mountain View, CA: Mayfield, 1999.
9. Hasted Douglas N, Lacy Allan C. Measurement and Evaluation in Physical Education and Exercise Science Arizona: Gorsuch Scarisbrick Publishers, 1994.
10. Mathews Donald K. Measurement in Physical Education, Philadelphia: W.B. Saunders Co, 1978.
11. Peter David, Total Health London: Marshall Publication, 1988.