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Comparative study on health consciousness between rural and urban school students

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Abstract

Health is a very important part to our daily life. Good health depends on many factors, such as Genetic factors, Environmental factors, social factors, Economic factors etc. Health Consciousness define an attitude which one aware about our lifestyle. The data was collected from 50 Rural and 50. Urban school students of Purba Burdwan district through Health Consciousness scales constructed by Chihwei Selenu Hu in 2013. After collecting the data, the researcher gone through descriptive statistics that is Mean, SD and comparative statistics that is “t” to compare difference between two groups. On the basis of result and discussion the following conclusion were drawn -

1. Urban students were more Health Conscious, Health Self-Conscious, Mental Health Orientation, and Health Responsibility than Rural school student.
2. There was no significance difference in Health Value, Health Information Seeking, Physical Health Orientation between Rural and Urban students.

Keywords: Health, health consciousness, awareness, rural, urban

Introduction

Health is a very important part to our daily life. Good health depends on many factors, such as Genetic factors, Environmental factors, social factors, Economic factors etc. Health consciousness define an attitude which one aware about our lifestyle. It is said prevention is better than cure and for that knowledge of health consciousness and awareness is necessary.

In 1986, the who made further clarifications?

“A resource for everyday life, not the objective of living. Health is a positive concept emphasizing social and personal resources, as well as physical capacities”. This means that health is a resource to support an individual’s function in wider society, rather than an end in itself. A healthful lifestyle provides the means to lead a full life with meaning and purpose”.

There are so many dimensions of Health Consciousness, such as Health Self- Consciousness, Health Value, Health Information Seeking, Mental Health Orientation, Health Motivation, Health Knowledge, Health Responsibility etc.to do to stay healthy and whether there is any disease in the body etc. In one word health knowledge is information and skill acquired through experience.

Singh, K. (2016) ^[3] studied on Health Consciousness between Rural and Urban school girls of Bilaspur. It was founded that the mean Health Consciousness score of rural school girls is 235.35 and urban school girls is 240.30. Standard deviation score for rural school girls is 2.61 and urban school girls are 2.72 and the t-value is 9.268 that show significance difference. Urban school girls have more Health Consciousness comparison to rural school girls.

Ture, R. S. and Ganesh, M.P. (2012) ^[7] studied on effect of Health Consciousness, material values and pro-environmental behaviors. International Proceeding of Economics Development & Research, vol.43, p. 41-45. The mediating role of environmental belief in these relationships is also investigated. To achieve this cross-sectional survey research was conducted in two Indian universities and 332 students doing engineering or management course responded to the survey. The regression analysis results show that Health Consciousness has positive relationship with pro environmental behaviors. In case of material values only one sub dimension namely ‘centrality of acquisition’ has negative relationship with Pro-environmental

behavior. Environmental belief did not mediate any relationship. Article discusses the limitations and future scope of research.

Methods and Materials

50 Urban and 50 rural female students from 16-18 years of old, total 100 female students were selected randomly from Purba Burdwan districts as the subjects of the present study. For the present study the following measurement were taken – Age(years), Height(cm) and Weight(kg) were taken as personal data and Health Consciousness was measure by Health Consciousness inventory made by Chihwei Selenu Hu in 2013 and measured following eight traits of Health Consciousness test, such as:

- i) Health self-Consciousness,
- ii) Health Value,
- iii) Health Information Seeking,
- iv) Physical Health Orientation,
- v) Mental Health Orientation,
- vi) Health Motivation,
- vii) Health Knowledge,
- viii) Health Responsibility.

The Health Consciousness inventory consist of 34 items, each item was marked in a six points scale. According to the scale value the score of an individual ranging from 0 to 204. After collecting the data, the result of the study was obtained through standard statistical procedure.

Result and Discussion

Table 1: The mean and SD value of personal data of the subjects

Sl. No.	Name of the Group	No of subjects	Age(year)	Height(cm)	Weight(kg)
			Mean±SD	Mean±SD	Mean±SD
1.	Urban	50	16.8±0.56	155.04 ± 6.32	52.08 ± 8.27
2.	Rural	50	17.14±0.60	154.74 ± 5.57	49.52 ± 8.89

From table- 1, it observed that the mean age of Urban and Rural students was 16.8 and 17.14 years respectively and S.D. were 0.56 and 0.60 years respectively. The mean Height of Urban and Rural students were 155.04 and 154.74 cm respectively and S.D. were 6.32 and 5.57 respectively. The mean Weight of Urban and Rural students were 52.08 & 49.52 kg respectively and S.D. were 8.27 & 8.89 kg respectively. Comparing the Mean and S.D. of age, Height, Weight of Rural and Urban students it appears that both the groups are homogeneous in personal data.

Table 2: Represent the Mean, SD, and t-value of Health Self-Consciousness & Health Values of Urban and Rural school students (girls)

Name of the Variable	Name of the groups	Number of subjects	Mean ± SD	t-value
Health Self-Consciousness	Urban	50	21.44 ± 4.83	4.13
	Rural	50	17.88 ± 3.71	
Health Value	Urban	50	28.36 ± 4.82	0.54
	Rural	50	27.92± 3.26	

*Significant value of t(0.05 (98) t = 1.98, DF = 98

Table no-2 shows that the mean of the Health Self-Consciousness value of urban students was 21.44 and S.D. was 4.83. And mean value of rural students was 17.88 & S.D. was 3.71 respectively. Comparing the mean values between groups a difference was observed. So, to observed the significant difference between groups independent 't' value

was calculated and fine the 't' value 4.13, which was significant at 0.5 level. So, Health Consciousness Urban girl's student were better than rural girl's students.

From table- 2, it also observed that the mean of the Health Value of Urban students was 28.36 & S.D. was 4.82. And mean value of rural students was 27.92 & S.D. was 3.26 respectively. Comparing the mean values between groups different was observed. So, to observed significant difference between groups independent 't' value was calculated and fine the 't' value 0.54, which was not significant at 0.5 level. So, there were no difference between Urban and Rural girl's students in Health Value.

Table 3: Represent the Mean, SD, and t-value of Health Information and Physical Health Orientation of Urban and Rural school girl students

Name of the Variable	Name of the groups	Number of subjects	Mean ± SD	t-value
Health Information	Urban	50	17.54 ± 3.97	1.40
	Rural	50	16.54±3.15	
Physical Health Orientation	Urban	50	16.94 ± 3.83	0.50
	Rural	50	16.58±3.28	

*Significant value of t(0.05 (98) t = 1.98, DF = 98

Table no – 3 shows that the mean of Health Information value of urban students was 17.54 & S.D. was 3.97. And the mean rural students were 16.54 & S.D. was 3.15 respectively. Comparing the mean values between groups different was observed. So, to observed the significance difference between groups independent 't' value was calculated and find the 't' value 1.40, which was not significant at 0.5 level. So, there were no difference between Urban and Rural girl student's in Health Information.

From table-3, it also observed that mean of Physical Health Orientation value of Urban and Rural students was 16.94 & 16.58 and S.D. was 3.83 & 3.28 respectively. Comparing the mean values between groups difference was observed. So, to observed the significance difference between groups 't' value was calculated and find the 't' value 0.50, which was not significant at 0.5 level. So, there were no difference between Urban and Rural girl students in Physical Health Orientation.

Table 4: Represent the Mean, SD, and t-value of Mental Health Orientation & Health Motivation of Urban and Rural school girl students

Name of the Variable	Name of the groups	Number of subjects	Mean ± SD	t-value
Mental Health Orientation	Urban	50	17.64 ± 3.83	2.73
	Rural	50	15.8±3.01	
Health Motivation	Urban	50	10.58 ± 2.88	0.43
	Rural	50	10.34±2.75	

*Significant value of t(0.05 (98) t = 1.98, DF = 98

From table -4 it observed that the mean of Mental Health Orientation value of Urban students was 17.64 & S.D. was 3.71. And the mean of Rural students was 15.8 & S.D. was 3.01 respectively. Comparing the mean values between groups difference was observed. So, to observed the significance difference between groups independent 't' value was calculated and find the 't' value 2.73 which was significant at 0.5 level. So, Mental Health Orientation Urban girl students were better than Rural girl students.

From table-4, it also shows that the mean of Health Motivation value of Urban and Rural students was 10.58 & 10.34 respectively and S.D. was 2.88 & 2.75 respectively.

Comparing the mean values between groups difference was observed. So, to observed the significance difference between groups ‘t’ value was calculated and find the ‘t’ value 0.43, which was not significant at 0.5 level. So, there were no difference between Urban and Rural girl student in Health Motivation.

13.76&13.58 and S.D. was 2.62& 2.25 respectively. Comparing the mean values between groups difference was observed. So, to observed the significance different between groups independent ‘t’ value was calculated and find the ‘t’ value 3.70 which was significant at 0.5 level. So, Health Responsibility Urban girl students were better than Rural girl students.

Table 5: Represent the Mean, SD, and t-value of Health Knowledge & Health Responsibility of Urban and Rural school girl students

Name of the Variable	Name of the groups	Number of subjects	Mean ± SD	t-value
Health Knowledge	Urban	50	17.08 ± 4.0	1.91
	Rural	50	15.6±3.79	
Health Responsibility	Urban	50	13.76±2.62	3.70
	Rural	50	13.58 ± 2.25	

*Significant value of t(0.05 (98) t = 1.98, DF = 98

From table -5 it observed that the mean of Health Knowledge value of urban students was 17.08 & S.D. was 4.0. And the mean value of rural students was 15.6 & S.D. was 3.79 respectively. Comparing the mean values between groups difference was observed. So, to observed the significance difference between groups ‘t’ value was calculated and find the ‘t’ value 1.91 which was not significant at 0.5 level. So, there were no difference between Urban and Rural girl student in Health Knowledge.

From table- 5, it also observed that the mean of Health Responsibility value of Urban and Rural students was

Table 6: Represent the Mean, SD, and t-value of Health consciousness of Urban and Rural school girl students

Name of the Variable	Name of the groups	Number of subjects	Mean ± SD	t-value
Health Consciousness	Urban	50	145.42 ± 22.45	2.90
	Rural	50	132.82 ± 12.8	

*Significant value of t(0.05 (98) t = 1.98, DF = 98

From table -6 it was observed that the mean of Health Consciousness value of Urban and Rural students was 145.42 & 132.82 respectively and the S.D. was 22.45 & 12.8 respectively. Comparing the mean values between groups difference was observed. So, to observed the significance different between groups ‘t’ value was calculated and find the ‘t’ value 2.90 which was significant at 0.5 level. So, Health Consciousness Urban girl students better than rural girl students.

The difference between Urban and Rural girls’ students in Health Consciousness value were also presented a graphically in fig no 1.

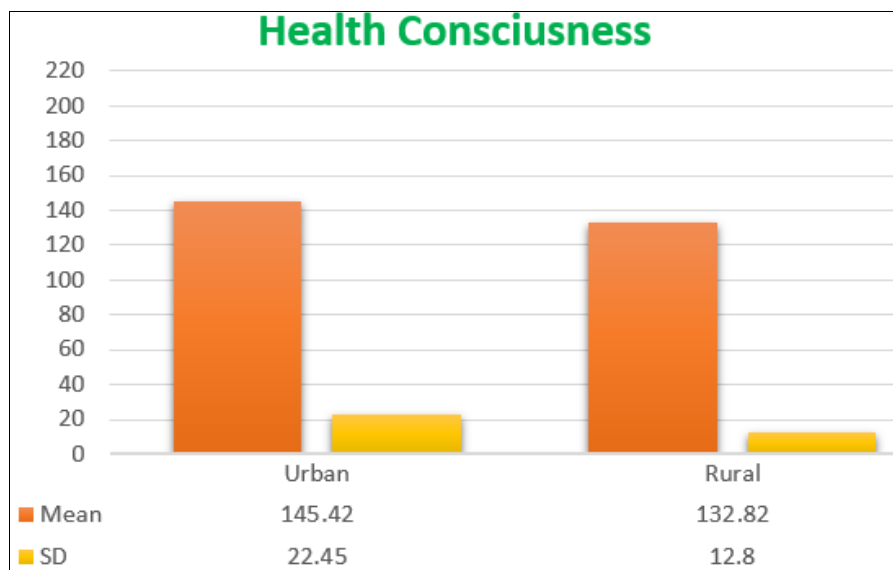


Fig 1: Graphical presentation of Mean& S.D value of Health Consciousness of Urban and Rural school students

Discussion

In this study researcher was found the difference between Urban and rural girls school students. Urban students were more Health Conscious as compared to rural students. The researcher further interested to compare the 8 dimensions of Health Consciousness Urban and Rural girls school students. It was found that in Health Self – Consciousness and Mental Health Orientation Urban girls’ students were better than rural girls’ students. In the health value, Health Information Seeking, Physical Health Orientation, Health Motivation, Health Knowledge, and Health Responsibility no significant difference were found between Urban and Rural girls school students. So, in the above 6 dimensions of Health Consciousness scale the Urban and Rural girl’s students possess more or less same concept.

It may happen due to the fact that Urban girls’ students were used to gate more facilities from the government that is hospital, health centers and different communicational facilities. Beside the above mention condition the also use gate more household facilities like drinking water or tap water, electricity, home delivery, cleanliness and sanitation etc. provided by government. Considering the education facilities there were also lots of opportunity for the Urban students like as private schools, colleges, universities and as well as government institutions. These schools, colleges, universities organized many Health Consciousness or awareness program for student’s awareness about how to maintain their health and hygiene.

Singh K. 2016 work on Urban and Rural students on their Health Consciousness and found urban girls’ students were

more Health Conscious than their rural counterpart. The present study also agrees with the previous research work done by Singh 2016.

Conclusions

Within the limitations of the present investigation following conclusions were drawn on the basis of the obtained results:

1. In Health Self -Consciousness and in Health Value Urban girls' students were better than Rural girls' students.
2. In Health Information, Physical Health Orientation, Mental Health Orientation, Health Motivation, Health Knowledge, and Health Responsibility no difference was found between Urban and Rural girls' students.
3. The Urban girls' students were more Health Conscious as compared to Rural girls' school students.

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