

Assessment of Knowledge and Attitude and Practice of Family Towards Physical Activity in Makkah City, 2017

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ABSTRACT

Background: Physical activity could enhance the personal wellbeing and reduce the risks of many medical disease around the world

Objectives: Assessing the knowledge and attitude and practice (KAP) of family towards physical activity in Makkah city in Kingdom of Saudi Arabia (KSA).

Methods: This study was based on cross-sectional questionnaire sheet study conducted in Makkah City from September to November 2017 among 400 families from different parts of Makkah City.

Results: Most of the subjects had appropriable knowledge about the importance of physical activity and risk factors of physical inactivity. The attitude of the subjects was positive among most of them toward regular physical exercise, enhancing their family to practice physical activity and practicing physical activity with their family. The level of practice was insufficient among most of the respondents regarding sports practice with their family and going for a long walk with their family. But the majority taught their children about the importance of physical activity and 50.5% let their children practice swimming and light physical activity.

Conclusion: Although most of the subjects had good knowledge and attitude toward physical activity, the practice pattern was insufficient among most of them. There is a need for enhancing the physical activities among families in KSA and assessing the prevalence of chronic diseases among physically inactive subjects.

Keywords: Knowledge, Attitude, Practice, Physical Activity, Family, Makkah City, KSA.

INTRODUCTION

Physical activity could enhance the personal wellbeing and reduce the risks of many medical disease around the world⁽¹⁾. According to the WHO statistics, physical inactivity resulted in about 19 million disability and 1.9 million deaths. Also, it could induce major chronic diseases including diabetes, ischemic heart disease and many types of cancers including breast and colon cancer⁽²⁾. It was rated as the fourth leading cause of death with a global mortality rate accounting more than 6%⁽³⁾. The risks of physical inactivity were found to be high in developing countries than in developed ones. In KSA, the estimated physical inactivity risks were 44.6% which was higher than that in the United Kingdom (37%) and in the United States (35%)⁽⁴⁾.

About 60% of the Saudi population were considered physically inactive and 90% of them may sit for more than 2 hours consecutively⁽⁵⁾. In KSA, many studies have been conducted to assess the adoption of Saudi subjects to physical activity in which there were a high prevalence of physical insufficiency among adults^(6, 7). Physical activity (PA) has many benefits but most of populations are still inactive. This could be due to many barriers including time, society habits and the dry weather^(8, 9). There is a lack of studies conducted in KSA to determine the prevalence of PA among family members. Also, other studies that assess the prevalence of physical activity failed to recognize

its pattern in different areas^(10, 11). The present study aimed at assessing towards family towards physical activity in Makkah city in Kingdom of Saudi Arabia (KSA).

METHODS

Study design

This study was based on cross-sectional questionnaire sheet study conducted in Makkah City from September to November 2017.

Study population and sample size

The study population were parents from both genders and have at least one children. Makkah was divided into 4 regions (east, west, north and south) and 100 random houses were chosen from each part using multi-randomized sampling technique. Thus 400 families were included in the study who were interviewed at their houses and asked to answer the questionnaire.

Study tools

There was no available studies that evaluated the physical activity of the family thus the questionnaire was developed after reviewing the available studies that were conducted to study the knowledge about physical activity in KSA. The questionnaire was revised and validated by 3 experts then translated into Arabic. The questionnaire included 4 parts divided as demographics, knowledge, attitude and practice of the study participants toward physical activity.

Ethical approval

The questionnaire was validated by the supervisors and the study was approved from the faculty of Medicine. All the included families approved to participate in the study.

The study was done after approval of ethical board of Umm alqura university.

Statistical analysis

The data analysis was done using the SPSS (22) for windows. The variables are shown as percentages and frequencies.

RESULTS

Demographics of the studied subjects:

The included subjects aged from 25-50 years old. All the subjects were highly educated and the majority of them (84.5%) were working.

Assessment of knowledge of included subjects:

The knowledge of the included subjects presented in Table (1). All the respondents had good knowledge about the definition of physical activity and the importance of physical activity for making subjects healthier, energetic, decreasing the stress and maintaining the family health. Also, most of the subjects had good knowledge toward the risk of physical inactivity as 77.75% had proper knowledge about the effects of physical inactivity on higher prevalence of non-communicable diseases, 68% knew the importance of physical activity for decreasing the prevalence of diabetes, heart rate and cancers and 96% of them were aware that women are more susceptible for diseases than men due to physical inactivity. On the other hand, only 34% of the subjects knew that physical inactivity is a risk factor for mortality.

Table (1): Knowledge of family members about importance of physical activity (400):

Knowledge about practicing physical activities with family	Yes	No
Physical activity is any bodily movement that causes contraction of skeletal muscles	400 (100%)	0 (0%)
Physical inactivity is risk factor for non-communicable disease	311 (77.75%)	89 (22.25%)
Physical activity is a risk factor for diabetes, heart diseases and cancers	272 (68%)	128 (32%)
Physical inactivity is a risk factor for worldwide mortality	136 (34%)	264 (66%)
Women are at greater risk for diseases due to physical inactivity	304(96%)	96(24%)
Physical activity makes subjects more healthier	400(100%)	0(0%)
Physical activity makes people more energetic	400(100%)	0 (0%)
Physical activity could decrease stress	400 (100 %)	0 (0%)
Physical activity would guarantee family health	400 (100 %)	0 (0%)

Level of knowledge among respondents

Most of the subjects had appropriate knowledge about the importance of physical activity and risk factors of physical inactivity and only 14% of them had improper knowledge about physical activity (Table 2).

Table (2): Respondents' knowledge about physical activity:

Knowledge level	Frequency	Percent (%)
Good	344	86
Poor	56	14

Evaluating the subject's attitude

The attitude of the subjects was positive among most of them as all of them had positive attitude toward regular physical exercise, 89.25% of them will enhance their family to practice physical activity and 79.5% would take their family for regular practice (Table. 3).

Table (3): Attitude toward physical activity (n=400)

	No.	Percentage (%)
Are you in favor of regular physical exercise?		
Yes	400	100
No	0	0
would you enhance your family to practice sports		
Yes	357	89.25
No	43	10.75
Would you take your family for regular walk?		
Yes	318	79.5
No	82	20.5

Attitude score among respondents

The attitude score was positive among most of the subjects (89.5%) and was negative among only 10.5% of the subjects (Table. 4).

Table (4): Respondents' attitude score

Attitude level	Frequency	Percent (%)
Good	358	89.5
Poor	42	10.5

Practice pattern of included subjects

The respondent's practice is shown in Table (5). The level of practice was insufficient among most of the respondents as only 31.5% would practice sports with their family and 29.5% would go for a long walk with their family. On the other hand, 75.5% taught their children about the importance of physical activity and 50.5% let their children practice swimming and light physical activity.

Table (5): practice pattern toward physical activity (n=400)

I always practice sports with my family	126 (31.5%)	274 (68.5%)
I teach my children about the importance of physical activity	302 (75.5%)	98 (24.5%)
We go for a long walk every Friday	118 (29.5%)	282 (70.5%)
My children always practice swimming and light physical activity	202 (50.5%)	198 (49.5%)

Level of knowledge among respondents:

The practice pattern was good among 44% of the subjects and 56% had low practice score toward physical activity (Table. 6).

Table (6): Respondents' practice score:

Practice score	Frequency	Percent (%)
Good	176	44
Poor	224	56

DISCUSSION

The present study was the first study to evaluate the KAP of families toward physical activity. The knowledge and attitude score were appropriate among most of the subjects but the practice score was low among Saudi families in Makkah City. The knowledge of the respondents about definition of physical activity was proper among the majority of families also the majority had good knowledge about the risk factors of physical inactivity to induce non-communicable and chronic disease. However, all the subjects were highly educated and had good knowledge about physical activity,

the practice pattern was insufficient and this could be attributed to that most of the participants are working and the Saudi women are banned from driving and walking alone. These habits may decrease the level of practice among Saudi subjects which lead to physical inactivity and affect the health ^(6,12).

Another study in China showed high knowledge which was associated with a high practice pattern of physical activity which was in contrast with our results ⁽¹³⁾. This was also against the study of **Ward and his colleagues** ⁽¹⁴⁾ who showed that the knowledge and attitude were related to the practice pattern and can change the behavior of respondents. Also, other studies showed the same results in which many subjects would change their behaviors when they had good knowledge about importance of physical activity ⁽¹⁵⁻¹⁹⁾.

The present study has some strength factors including that it is the first study to assess the KAP of families toward physical activities. The Sample size was sufficient and the developed questionnaire was easy to manage their KAP toward physical activity.

This study has also some limitations including that the practice pattern was self-reported, most of the subjects were highly educated and workers which don't represent all the community in Makkah city.

CONCLUSION

Although most of the subjects had good knowledge and attitude toward physical activity, the practice pattern was insufficient among most of them. There is a need for enhancing the physical activities among families in KSA and assessing the prevalence of chronic diseases among physically inactive subjects.

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