

## A Study on the Lifestyle of the Iranian University Students

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**Objective:** Chaotic and unhealthy lifestyles in young generation will have a costly consequence for the health services in the future. The aim of the current study was to explore the way the Iranian University students live in order to inform the way for provision of better preventive strategies against chronic physical and psychological disabilities.

**Methods:** Current study was carried out on 470 university students who completed a self administered questionnaire about various variables including their body mass index, nutritional status, physical activity, sleep pattern, physical and psychological wellbeing and substance use.

**Results:** Our study revealed that, in general, some students, particularly those who were studying medicine, were not enjoying a healthy lifestyle. However, female students were doing better than males in this regard.

**Conclusion:** The findings of our study are overall in accord with the results of the studies published in other countries. This should inform policy makers and health service managers to develop health action programs for university students to promote healthy lifestyle.

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### Introduction

Lifestyle is a recognizable behavioral pattern stemming from interaction between personal characteristics of an individual and his/her life's circumstances. Lifestyle reflects social values, attitudes and activities of a person (1). Personal health is a function of lifestyle and behavior, which can be altered through medical advice. The unhealthy lifestyle, common in modern societies, accounts for a high number of mortalities secondary to preventable diseases (2,3).

A study of lifestyle in the University students is important at least for two reasons. Firstly, as highly educated professionals, they are role models for other people. This is especially true about medical students, who are going to provide healthy advice to ordinary people throughout their career and therefore should be urged to practice what they will be preaching in future (4,5). Secondly,

students are young and their behavior can reflect the health status of the society they are going to live in the coming years.

The aim of the current study was to explore the Iranian students' lifestyle in order to formulate policies and educational and behavioral programs to promote their overall wellbeing.

### Materials and Methods

The study was carried out among 470 University students in Kerman province in Iran. A self-administered questionnaire, which had been developed following a literature search, was distributed among the students. All 470 students completed and returned the questionnaire, which contained items on demographic characteristics of students and their lifestyle. Data on weight and height (to calculated Body Mass Index; BMI), nutritional status, weekly physical activities, sleep pattern, current use of substances or their use in the past, dental hygiene and physical and psychological wellbeing were collected. The SPSS version 11.5 was used for the analysis of data. The associations among variables

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were tested using  $\chi^2$ , Student's t-test, Spearman's correlation test and ANOVA.

### Results

Forty nine percent of students were male and 51% were female. Age average of the participants was 21.14 years ( $\pm 1.8$ ). There was a statistically significant difference between the mean age of boys and girls ( $p = 0.028$ ).

Students with a lower BMI were least satisfied with their weight; however, this was not related to the presence of depression. 66% of the students reported that they exercised less than three times per week, with half of them reported that they never exercised throughout the week. Male students exercised more than the females ( $p = 0.002$ ). Surprisingly, medical students reported lesser number of exercise sessions per week than others. Female students and medical students were more aware of the long-term complications of high blood pressure and the importance of controlling it.

Shockingly, about half of the students reported depressive symptoms. We could not find any association between these symptoms and other variables studied in this project.

We also found that female students, non-medical students and students living in dormitories enjoyed a more balanced and healthy sleep pattern.

About 3.1% of the students reported a regular alcohol intake, but 9% of them said that they used it occasionally. We consider these figures as important, as alcohol, in any amount, is regarded as an illegal substance in Iran. The prevalence of alcohol use was higher in boys than girls. Those who drank

alcohol were more prone to use tobacco and other illicit substances such as opium and its derivatives, hashish, ecstasy and amphetamine. Table 1 shows the prevalence of various substances in both regular users and those who used it in the past.

### Discussion

We found that, overall, about 2/3 of our sample size had a normal BMI regardless of their gender. This was similar to the finding of the previous studies (3). In our research, more than 70% of the female students reported a normal weight. 3.6 % of them had a BMI of below 20, which is less than what is reported in other studies (3,6,7) but more similar to the findings of other studies in Asian students (8).

About 42.9% of students said that they never exercised, most of them being medical students. This is very much higher than the figures reported in other studies (3,6,9). However, we are aware of at least one study, which reported that 68 % of their sample enjoyed adequate sporting activities per week (2).

Limited numbers of exercise sessions per week can reflect either a lack of gym in deprived areas or not having enough money to attend one. Similar figures have been reported in countries neighbors to Iran and might reflect some cultural elements as well, which needs further exploration (6). Some times results of studies can be conflicting in this regard. For example, some studies have reported inadequate physical activities in 77% of students in the United Arab Emirates, while other studies indicated that 68% of them exercised adequately (2).

**Table 1 :** Prevalence of substance abuse and its association with demographic variables

|  | Cigarette | Alcohol | Stimulant | Cannabis | Opium and related substances |
|--|-----------|---------|-----------|----------|------------------------------|
| At least, used once in the past                    | 54%       | 9%      | 9%        | 10%      | 13%                          |
| Current use  | 6.6%      | 3.1%    | 0.4%      | 0.4%     | 0.4%                         |
| P value regarding gender difference                | 0.000     | 0.000   | 0.002     | 0.000    | 0.000                        |
| P value regarding difference in marital status     | NS†       | NS      | NS        | NS       | NS                           |
| P value regarding difference in living environment | NS        | NS      | NS        | 0.023    | NS                           |
| P value regarding difference in the field of study | NS        | NS      | NS        | 0.024    | 0.000                        |

†NS: non significant  
Significant P value <0.05

Attention has always been paid to the sleep pattern of students due to its effect on their academic performance (10). Most students, in our study, reported that they slept 6-8 hours per night, which is similar to findings of the other studies (11-13). The most balanced sleep pattern was found among students of basic sciences. The most chaotic sleep pattern was noticed in students who lived at rented houses either alone or in groups. In many studies, medical students reportedly slept less (14, 15). One of the explanations can be that medical students have to do night shifts at hospitals during the last two years of their study.

Routine medical checkup and investigation was mentioned by about half of our students which is approximately twice more than what has been reported from a study in United Arab Emirates(6). According to another study, 42% of students had gone through regular medical checkups, but only 22% went to a dentist (16). Availability of medical services at reasonable price can be the reason for more medical visits among the Iranian students (6). The cost of dental work up is quite high in Iran, which can explain the low frequency of their visits to dentists. Students, who regularly received dental check up, were mainly those living with their families and therefore, we suggest, had a better financial support to afford a dentist.

Symptoms of depression were noticed in about half of our students. This can however, reflect the generally high incidence of depression in the wider public. Although, this does not indicate that half of our sample suffered from clinical depression as we more concentrated on separate symptomatology rather than a cluster of symptoms. However, this number is still high in comparison to what has been found in other studies (13).

Difficulties with time management, having to read voluminous textbooks and financial problems were all mentioned as major reasons for feeling stressed among students. But despite many complaints about mental health problems, only few students visited psychiatrists, freely accessible to them at special consultation centers. Is this because students, like most ordinary people, do not appreciate the significance of the mental health problems or

is it because social taboos and a feeling of stigmatization prevent them from seeking psychiatric help?

Drug abuse has always been a major concern because of its effects on biopsychosocial health of the youth, especially University students (17-19). In our study, regular use of alcohol was noticed among 3.1% of students, but none of them reported any symptoms suggestive of an alcohol dependency. This figure is understandably lower than the 9.4% reported by students in the United States (13,20) and 26 percent reported by British students (21). Alcohol abuse has been reported at a prevalence of 22% in Turkish students (7,22). Some studies have even reported figures as high as 91.8 and 96% among American and British students respectively (18,23). Alcohol abuse in our study was significantly lower in female students than males, though some studies have not found such a difference (22).

The most commonly used substance among students was, in our study, cigarette (6.6%). The figure is not much different from what has been observed in the wider public and in other studies (24,25). Unfortunately, this high figure is still seen in spite of ban of publicity on cigarette and its use in public places (26). Clear difference found in our study between males and females in terms of smoking. This is similar to the results of other published studies (27-29). In addition, in Iran like many other Asian countries, smoking is considered socially unacceptable in young girls (30), though some studies have produced contradictory results (31).

The most common illicit drug consumed in Iran is opium, which was also the most frequently used drug among medical students participating in our study.

Although in developed countries a reduction in the use of opium can be observed, in developing nations it is still increasing (25). High consumption of opium and alcohol compared to other drugs is, perhaps, due to the fact that they are, falsely, believed to exert some positive psychological and physical effects.

Stimulants are the least consumed drugs, despite their easy availability in Iran. This is historically the case, as the most commonly

abused illicit drug in Iran has always been opium, probably due to a close proximity of Iran to Afghanistan. Although in some studies, stimulant drug abuse was equal in both genders (31), we found that our female students used more stimulants than the male students. Use of other drugs including cannabis was lower in our study compared to the other studies (32). This was a surprising finding as cannabis is cheap and easily available in the street.

In conclusion, our study revealed various patterns of unhealthy lifestyle among students in general, particularly among medical students. As these groups will be the future health facilitators and at the same time a role model for others at the forefront of the battle against health inequalities, we recommend the introduction of regular health action plans for College and University students to address the significant issue of unhealthy lifestyles for the future benefit of the society as a whole.

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