ABSTRACT

The knowledge, attitudes and practices of women attending health centers towards physical exercise, (ages 19 years and over).

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Chronic diseases are the leading causes of mortality and morbidity in the Caribbean. The surge of diseases such as diabetes, hypertension, coronary heart disease, osteoarthritis, obesity and cancer have been linked to lifestyle practices. Poor dietary habits, stress, cigarette smoking and sedentary behaviors have been identified as causes for the high incidences of these diseases. Obesity has been noted to be of especially high prevalence amongst women in the Caribbean; more so than in men. Obesity is linked to chronic diseases. Like the above-mentioned diseases, it can be prevented by the practice of healthy lifestyle practices. Physical exercise has been proven to prevent the onset of these chronic diseases and has also been proven to decrease the likelihood of obesity and the morbidity and mortality associated with these chronic diseases.

A cross-sectional study was done to assess the knowledge, attitudes and practices amongst women, (ages 19 years and over) attending a private health center and a public health center in Harbour View, Kingston 17. One hundred and six women attending the
centers successfully completed questionnaires. Focus group interviews were also conducted. Findings suggested that there is insufficient knowledge of the health related benefits of regular physical exercise amongst these women. Moreover, exercise is not considered to be an extremely important tool for health maintenance and prevention of chronic disease. Few women interviewed participate in regular physical exercise and the majority of the participants were pre-obese or obese. Of the women with chronic diseases, those with hypertension and hypercholesterolaemia exercised significantly more than those with out these diseases. No link was found between level of education, income or other psychosocial factors to the practice of regular exercise. However, the practice of regular exercise was linked to the number of daily domestic responsibilities and the degree of physical activity exerted daily. With the exception of those women with chronic diseases, few women said that they were advised by health professionals to participate in regular physical activity.

The study has highlighted the extent of physical inactivity and the urgent need to increase awareness of the benefits of exercise and to increase the level of activity amongst women. The same is true for Health care providers; they also need to learn skills in counseling on physical exercise as part of their overall management of their patients. They also need to be knowledgeable on how to help their patients choose the most appropriate exercises.
Further research needs to be done for a full appreciation of the level of participation of physical activity on a national level. Much greater attention needs to be given by health providers and policy makers to the importance of physical exercise in the promotion of healthy living and the prevention of chronic diseases. Strategies to improve the levels of activity in women will necessitate changes at the policy level, the development of innovative programs and their implementation into communities, the work place and schools.