

HEALTH PRACTICES OF THE JORDANIAN MILITARY WOMEN

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ABSTRACT

Objective: To assess the health practices of the Jordanian military women and to find the relationship between health practices, marital status, and the type of career.

Methods: This study was conducted on 120 Jordanian military women, who were randomly chosen from the total population of about 3000 women enlisted in the Jordan Armed Forces / Directorate of Military Women's Affairs during the period between June 2001 to May 2002. A purposefully designed questionnaire was completed by all subjects. Data were statistically analyzed.

Results: Nutritional issue received the utmost attention of the military women (mean>2.4). Most subjects practiced rest and relaxation at break times, besides sleeping normally (mean=2.4), the least healthy practices were entertainment. Results also showed that women practiced breast self-examination, regular dental check-up and regular vaccination, but they did not practice regular medical and gynecological check-ups.

Conclusion: The Jordanian military women frequently perform some health practices with a reasonable level. Orientation, health education programs and workshops are recommended to advise Jordanian military women on physical and psychological comfort either during or after working hours.

Key words: Health, Health practices, Jordanian military women.

JRMS June 2004; 11(1): 40-43

Introduction

A Woman has to take care of her health and health practices especially when her health does not affect her only, but it is also reflected on both her family and the whole community. Some researchers have indicated that the women's special needs related to health like personal hygiene, nutrition, health care, physical exercises, sleep, and recreational activities, which insure good health, were neglected ⁽¹⁾. However, the intensive concentration of studies was exclusively focused on maternal health and on women who bear children ⁽²⁾. Thus, the woman's general health awareness may help her to answer some questions related to her health and her health practices ⁽³⁾, therefore, make her aware of unhealthy practices such as high cholesterol and low fiber diet, poor intake of fruits, vegetables and dairy products,

which may subsequently lead to serious diseases ⁽⁴⁾.

Health practices are not only related to diet or physical exercises; they may also be related to gender, age, nationality, and type of career. Studies showed that women are exposed more than men to the risks of poor health status especially after the age of 45 years ⁽⁵⁾. Economical status and social concepts which reflect culture play a significant role in practicing health activities as demonstrated in a study conducted upon 58 Saudi young women, where the results showed that 72% of them practiced healthy methods in their lives and had enough sleeping hours along with healthy types of food and proper hygiene ⁽⁶⁾. However, in another study conducted on nursing students and students of other colleges at the same university in USA to examine health practices, results showed that there was a difference regarding the use

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Manuscript received December 4, 2002. Accepted October 30, 2003.

of seat-belt, alcohol addiction, poor nutrition, drug abuse and long hours of sleeping. It was found that health practices were more frequently practiced among nursing students⁽⁷⁾.

This study was conducted to assess the health practices of the military Jordanian women and determine the relationship between health practices, marital status, and type of career.

Methods

This study was conducted on 120 military Jordanian women who were randomly selected. A systemic sampling method was used to recruit the subjects from the total population of 3000 in the Jordan Armed Forces / Directorate of Military Women's Affairs (DMWA)⁽⁸⁾, female personnel, between June 2001 to May 2002.

The sample responded to a purposefully developed self-administered questionnaire that consisted of 20 items based on Gordon's functional health pattern 1986⁽⁹⁾. The questionnaire was a structured Likert-type scale, which was designed to investigate five dimensions of health behaviors and practices of the study subjects. Those dimensions were: Nutritional behaviors, personal hygiene, physical exercise, health maintenance, and entertainment. Scoring of responses were: Never=1, Sometimes=2 and Always=3. The questionnaire was shared with experts in the field. The tool was developed in Arabic, to fulfill the purpose of this study so as to overcome the language barrier. Using the internal coordination correlation for the items based on Cronbach's Alpha equivalent, the reliability and total reliability value was 0.93 and data were analyzed using percentages, means, standard deviations and t-test.

Results

The results revealed that the participants' age ranged between 19-24 years. About 31.5% were single while 68.5% were married. Nurses comprised 64.5% of the sample and subjects of other careers were 35.5% as shown in Table I. It was found that the military nurses performed health practices more than military non-nurses women (Table II). On the contrary, there were no significant differences between single and married women (Table III). Regarding health practices which are: nutritional behaviors, personal hygiene, exercise, health maintenance and entertainment, results showed that the respondents obtained the highest mean score, average mean was > 2 on all nutritional items and personal hygiene. Some of the subjects practiced exercises and health maintenance activities (Table IV). On the other hand, subjects had the lowest scores (mean < 2) on performing some practices such as;

regular medical check-up, regular gynecological check-up, practicing heavy exercise, and entertainment as shown in Table IV.

Health maintenance practices in the present study showed that although military women perform self-breast examination (SBE) and dental check-up regularly, they do not perform regular medical and gynecological check-up. In the present study, military women reported that they use leisure time for rest and sleep and this may be attributed to the high percentage of nurses (64.5%) participating in this study who work at shifting schedule. Moreover, women in this study were not interested in activities related to entertainment, as 68.5% of the sample are married and therefore spend most of their leisure time in caring for their families as well as using the leisure time for rest.

Discussion

The results of this study showed that the commonest health practices performed by the military women was proper nutrition as most of the participants were within the normal range of weight. They rely on food quality rather than quantity, which means that the military women eat a well balanced diet. These results are consistent with the results of a study conducted on Saudi women, which indicated that Saudi women are practicing healthy ways such as eating a variety of healthy food regularly⁽⁶⁾.

In another study conducted in Jordan, the results showed that 49% of the women in the study believed that their diet was inadequate and reported that they did not eat enough food. This finding is expected because the study sample consisted of Jordanian women whose household income was below the poverty line⁽¹⁾.

Regarding personal hygiene, the results of the present study revealed that the majority of military women brushed their teeth at least once daily and bathed once daily, while another study conducted in Jordan revealed that the majority of women brushed their teeth at least once daily but they bathed once a week⁽¹⁾. The discrepancy of the results of both studies may be attributed to the differences between the characteristics of the two samples.

The results of the present study are in accordance with a study conducted on Saudi women as the subjects of both studies were interested in the cleanness of the genital organs⁽⁶⁾. It is clear that religion affects these practices as Islam urges the cleanness of the genital organs for both males and females, and washing up is mandatory for each of the five prayers.

Regarding physical exercise, the results indicated that the military women performed physical exercises as a means to maintain weight and avoid obesity. The

commonest physical exercises practiced by military women were: Regular walking, daily physical fitness exercises, and daily sport activities, whereas the least common physical exercises practiced by these women were: Military drills, and strenuous physical exercises. This may be interpreted by the fact that 64.5% of the sample were nurses whom their work did not require these kinds of physical exercises.

The military women were engaged in physical exercises more than other non-military Jordanian women as revealed by another study ⁽¹⁾.

Regarding the differences between married and single women in their health practices, the study showed no significant differences. The same results were found in a study conducted in Jordan ⁽¹⁾. Meanwhile, the study showed significant differences between nurses and non-nurses as nurses practice more health practices than non-nurses, this might be due to the nature of nurses' work as they care for patients. Also it might be due to the interest the participants have in health practices.

Similar results were obtained in a study conducted

in USA, which showed significant differences among nursing students and students of other faculties, and indicated that nursing students perform more health practices than other students ⁽⁷⁾. Conducting health-related educational programs and workshops about health practices is recommended to maintain and promote health and well being of women. On the other hand, another study conducted on young adult women in USA indicated that there was no difference among nursing students and non-nursing students regarding health perception and behavior ⁽¹⁰⁾.

Health-related educational programs and orientation workshops about health practices is recommended for military women to maintain their health and promote their well being.

In conclusion the Jordanian military women frequently perform some health practices with a reasonable level. Orientation, health education programs and workshops are recommended to advise Jordanian military women on physical and psychological comfort either during or after working hours.

Table I. Demographic characteristics of the study groups.

Study variable	Groups	Number	Percentage
Age	19-24 years	23	19.0
	25-30 years	47	39.0
	31-35 years	32	27.0
	36-45 years	18	15.0
Marital status	Single	38	32.0
	Married	82	68.0
Type of career	Nurses	77	64.0
	Non - nurses	43	36.0

Table II. Comparison between military nurses and non – nurses military women regarding health practices

Profession	No.	Mean± S.D.	t- test	p value
Nurses	77	2.6±0.32	2.12	0.02
Non - nurses	43	3.6±0.31		

Table III. Comparison between single and married military women regarding health practices

Marital Status	No.	Mean ±S.D.	T- test	p value
Single	38	2.5±0.37	-0.48	0.63
Married	82	2.7±0.38		

Table IV. The different means of the different health practices.

No.	Items	Mean± S.D.
	Nutritional behavior	
11	Having enough food	2.72±0.23
18	Controlling weight within limits	2.51±0.43
20	Focusing on food quality	2.44±0.54
2	Drinking fluids regularly	2.41±0.75
	Personal hygiene	
6	Bathing once daily	2.68±0.32
14	Brushing tooth once daily	2.65±0.33
12	Caring of genital area	2.54±0.42
	Physical Exercise	
8	Walking daily	2.65±0.34
7	Practicing physical activity daily	2.23±0.69
5	Practicing physical fitness exercises daily.	2.22±0.75
	Health maintenance	
17	Breast self examination	2.24±0.52
9	Regular dental check-ups	2.23±0.54
15	Regular vaccination	2.11±0.74
	Entertainment	
13	Resting and relaxing at break times	2.44±0.52
10	Sleeping normally at regular times	2.41±0.51
	Exercise	
3	Practicing military drill once daily	1.72±0.60
4	Practicing heavy exercises	1.43±0.42
	Health maintenance	
1	Regular medical check- up	1.88±0.62
19	Regular gynecological check- up	1.84±0.65
	Entertainment	
16	Outdoor entertainment	1.60±0.58

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