



International Journal of Home Science

ISSN: 2395-7476

IJHS 2024; 10(3): 105-108

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www.homesciencejournal.com

Received: 12-06-2024

Accepted: 16-07-2024

Preet Gill

Ph.D Scholar, Department of Resource Management and Consumer Sciences, I.C. College of Community Science, CCS HAU, Hisar, Haryana, India

Dr. Kiran Singh

Professor, Department of Resource Management and Consumer Sciences, I.C. College of Community Science, CCS HAU, Hisar, Haryana, India

Gargi Godara

Ph.D Scholar, Department of Resource Management and Consumer Sciences, I.C. College of Community Science, CCS HAU, Hisar, Haryana, India

Corresponding Author:

Preet Gill

Ph.D Scholar, Department of Resource Management and Consumer Sciences, I.C. College of Community Science, CCS HAU, Hisar, Haryana, India

Lifestyle factors and their impact on physical fitness in elderly women

Preet Gill, Dr. Kiran Singh and Gargi Godara

Abstract

Older adults are the fastest growing segment of society, experience the highest rate of chronic diseases and conditions, and require the highest long-term care costs of all age groups. Healthy lifestyle is considered an important tool to prevent chronic conditions and institutionalization in older adults. Global estimates indicate that the number of elderly would exceed the number of children for the very first time in the year 2047. The increase would be from 841 million elderlies in the year 2013 to over 2 billion elderlies in the year 2050. The purpose of the study was to assess the lifestyle and physical fitness of elderly women of Hisar district of Haryana. Physical fitness was assessed by using step stool test and lifestyle was assessed by using FANTASTIC Lifestyle Questionnaire, developed in 1983 by Wilson and collaborators, can be used. For this total subject of 30 women respondents were selected from Hisar. Lifestyle showed that about 56.7% respondents falls under "good" category followed by 36.6% as "very good" and 6.7% in "excellent". Physical fitness score showed that about half of the respondents 50% had low average physical fitness score followed by high average (43.3%) and good (6.7%).

Keywords: Lifestyle, physical fitness, elderly, women

Introduction

The physical fitness of elderly women is a crucial aspect of health and well-being, influencing both longevity and quality of life. As women age, maintaining physical fitness becomes increasingly important to counteract the natural decline in muscle mass, bone density, and overall vitality. Lifestyle choices, including diet, exercise, and sleep patterns, play a significant role in determining physical fitness outcomes in this demographic. Regular physical activity is essential for reducing the risk of chronic diseases such as heart disease, diabetes, and osteoporosis. It also enhances mobility and balance, significantly lowering the risk of falls and related injuries. Mental health benefits are equally important; staying active can decrease symptoms of depression and anxiety, while improving cognitive function and potentially reducing the risk of dementia. The lifestyle choices of elderly women significantly influence their physical fitness, impacting both their health and quality of life. Regular physical activity, a balanced diet, and adequate sleep are key factors that contribute to maintaining physical fitness in this demographic. To evaluate their lifestyles, the FANTASTIC Lifestyle Questionnaire, developed in 1983 by Wilson and collaborators, can be used. This questionnaire is designed to assess the population's lifestyles and is intended for use in community health education programs. It is a simple and quick questionnaire that evaluates nine dimensions. "FANTASTIC" is an acronym representing these dimensions: Family and friends (2 items), Activity and Associativity (3 items), Nutrition (3 items), Tobacco (2 items), Alcohol and other substances (6 items), Sleep and stress (3 items), Type of personality (3 items), Introspection (3 items), and Control of health (3 items). Research consistently shows that lifestyle choices significantly impact the health and fitness of elderly women. In the current context, it is essential to study and assess the impact of lifestyle on the physical fitness of elderly women. So, the current study was planned to assess the lifestyle and physical fitness of elderly women.

Methodology

Technical programme of work: This section presents the procedure which were adopted for conducting the present investigation.

Locale of study: Hisar from Haryana state were selected purposively for the survey work because respondents used to walking in HAU campus daily.

Sample procedure: Sample were comprised of 30 respondents were selected from Hisar. Variables

S. No	Independent variables	Measurements
1	Age	Chronological age
2	Education	Schedule was developed
3	Marital status	
4	Family type	
5	Family size	
6	Family income	
7	Lifestyle	Modified Fantastic lifestyle check list (Wilson Douglas 1985) [9]

S. No	Dependent variable	Measurement
1	Heart rate	Heart rate monitor
2	Body mass index (BMI)	Quetelet's index
3	Physical fitness	Step-stool test

Results

Table 1: Background information

S.no	Variables	Women (n=30) f (%)
1	Age (years)	9 (30)
	45 - 50	
	50 - 55	
2	Above 55	6 (20)
	Education	5(16.7)
	10th	
12TH		
3	Graduation	10 (33.3)
	Postgraduate	13 (43.3)
	Marital status	2 (6.7)
4	Married	24 (80)
	Widow	6 (20)
	Family type	6 (20)
Joint		
Nuclear		
5	Extended	21(70)
	Family size	3 (10)
	Small (2-4)	18 (60)
6	Medium (4-6)	8 (26.7)
	Large (above 6)	4 (13.3)
	Family income	7 (23.3)
Less than 50k		
50k – 1 lakh		
	Above 1 lakh	18 (60)
		5 (16.7)

Background information: describe in table 1 state that among the 30 women participants, the age distribution reveals that 9 women, accounting for 30% of the sample, fall within the age range of 45 to 50 years. The majority of participants, 15 women or 50%, are aged between 50 and 55 years. The

remaining 6 women, representing 20% of the sample, are above 55 years old. This indicates a predominant age group of early senior years among the participants. The educational background of the participants varies, with 5 women (16.7%) having completed education up to the 10th grade. A higher proportion, 10 women (33.3%), have finished 12th grade, reflecting a moderate level of education within the group. The largest segment, comprising 13 women or 43.3%, are graduates, while only 2 women (6.7%) hold postgraduate degrees. This distribution suggests that most participants have at least completed high school, with a substantial number having attained graduation. The marital status data shows that a significant majority of the participants, 24 women or 80%, are married. In contrast, 6 women, making up 20% of the sample, are widows. This indicates a predominantly married demographic within the study. Examining the type of family structure, 6 women (20%) belong to joint families, while the majority, 21 women (70%), live in nuclear families. Additionally, 3 women (10%) are part of extended families. The data reveals that nuclear family setups are the most common among the participants. Regarding family size, 18 women (60%) live in small families consisting of 2 to 4 members. Medium-sized families, with 4 to 6 members, include 8 women (26.7%). Large families, having more than 6 members, comprise 4 women (13.3%). This indicates that smaller family units are more prevalent among the participants. The family income levels show that 7 women (23.3%) have a family income of less than 50,000 INR. The majority, 18 women (60%), have a family income ranging from 50,000 to 1 lakh INR. The remaining 5 women (16.7%) have a family income above 1 lakh INR. This suggests that most participants belong to middle-income families.

Table 2: awareness towards lifestyle

S. No.	Statements	Yes N(F)	No N(F)
1.	Do you engage in any form of physical exercise at least three times a week?	30 (100%)	
2.	Do you eat at least three servings of fruits and vegetables every day?	30 (100%)	
3.	Do you drink at least eight glasses of water daily?	22 (73.3)	8 (26.7)
4.	Do you regularly participate in social activities or community events?	12 (40)	18 (60)
5.	Do you take any supplements or vitamins as part of your daily routine?	20 (66.7)	10 (33.4)
6.	Do you get at least seven hours of sleep each night?	25 (83.3)	5 (16.7)
7.	Do you avoid smoking and limit alcohol consumption to moderate levels?	28 (93.3)	2 (6.7)
8.	Do you have regular check-ups with your healthcare provider?	30 (100%)	
9.	Do you engage in activities that challenge your mind, like puzzles or reading, on a regular basis?	30 (100%)	
10.	Do you feel you have adequate support from friends or family to maintain a healthy lifestyle?	30 (100%)	

Personal profile: showed in table 2 that all 30 participants (100%) reported that they engage in some form of physical exercise at least three times a week. This indicates a high level of physical activity among the women in the study. Similarly, all participants (100%) stated that they consume at least three servings of fruits and vegetables every day, reflecting a strong adherence to healthy dietary practices. When asked about their daily water intake, 22 women (73.3%) confirmed that they drink at least six glasses of water daily. However, 8 women (26.7%) do not meet this recommended level of hydration, indicating a potential area for improvement. Participation in social activities or community events is less common, with 12 women (40%) engaging regularly, while 18 women (60%) do not. This suggests that a majority of the participants may have limited social interactions outside their immediate family or work environments. Regarding the use of supplements or vitamins, 20 women (66.7%) incorporate them into their daily routine, whereas 10 women (33.4%) do not. This indicates that a significant portion of the participants are taking additional steps to support their nutritional needs. A majority of the participants, 25 women (83.3%), report getting at least seven hours of sleep each night, suggesting good sleep hygiene among most of the group. However, 5 women (16.7%) do not achieve this amount of rest. Avoidance of smoking and moderation in alcohol consumption is practiced by 28 women (93.3%). Only 2 women (6.7%) do not follow these guidelines, indicating a generally low level of smoking and excessive drinking among the participants. All participants (100%) have regular check-ups with their healthcare provider, highlighting a strong commitment to preventive health measures. Engaging in activities that challenge the mind, such as puzzles or reading, is a common practice among all participants (100%), indicating a high level of mental stimulation in their daily lives. Every participant (100%) feels they have adequate support from friends or family to maintain a healthy lifestyle, underscoring the importance of social support systems in promoting health and well-being.

Table 3: Fantastic lifestyle checklist score

S. No	Degree	Score	Women (n=30)
1.	Excellent	85-100	2 (6.7)
2.	Very Good	70-84	11(36.6)
3.	Good	55-69	17 (56.7)

Fantastic lifestyle checklist score: table 3 showed that about 56.7% respondents falls under "good" category followed by 36.6% as "very good" and 6.7% in "excellent".

Table 4: BMI (Body Mass Index)

S. No.	Women (n=30)
Height (cm)	159.23 ±4.44
Weight (kg)	63.55±5.09
BMI (kg/m ²)	25 ±1.24
Mesomorph (20-25)	26 (86.7)
Endomorph (above 25)	4 (13.3)

BMI (Body Mass Index): table 4 showed that average height, weight and BMI of the respondents were 159.23 cm, 63.55 kg and 25 kg/m². Around 86.7% were mesomorph body type followed by 13.3% were endomorph body type.

Table 5: Physical fitness test

S. No	women (N=30)
Resting H.R	76.40 ± 7.348
During exercise	123.70 ± 12.70
Recovery H.R	96.90 ± 10.525
PFI	98.00 ± 12.689

Physical fitness test: table 5 showed that the average resting heart rate observed was 76.40 beats per minute. The average heart rate observed during exercise was 123.70 beats per minute. The average heart rate observed during recovery was 96.90 beats per minute. This could denote a measure or score related to injury risk or recovery, with an average value of 98.00.

Table 6: Physical fitness score

S. No.	Score	Women (n=30)
Up to 80	Poor	
81-100	Low average	15(50)
101-115	High average	13 (43.3)
116-135	Good	2 (6.7)

Physical fitness score: table 6 showed that about half of the respondents 50% had low average physical fitness score followed by high average (43.3%) and good (6.7%).

Table 7: Correlation between lifestyle and physical fitness

Dependent variables	Fantastic lifestyle (Total)
BMI	0.128
Age	0.204
Education	0.571*
Body type	0.273
Income	0.164
PFI	0.385*

Correlation between lifestyle and physical fitness: table 7 showed that education and PFI showed positive correlation with fantastic lifestyle.

Conclusion

Older adults are the fastest growing segment of society, experience the highest rate of chronic diseases and conditions, and require the highest long-term care costs of all age groups. Healthy lifestyle is considered an important tool to prevent chronic conditions and institutionalization in older adults. Global estimates indicate that the number of elderly would exceed the number of children for the very first time in the year 2047. The increase would be from 841 million elderlies in the year 2013 to over 2 billion elderlies in the year 2050. Result showed that about 56.7% respondents falls under "good" category followed by 36.6% as "very good" and 6.7% in "excellent" fantastic lifestyle score. Physical fitness score showed that about half of the respondents 50% had low average physical fitness score followed by high average (43.3%) and good (6.7%).

Recommendation

- **Individualized Exercise Programs:** Tailored to fitness levels and health conditions.
- **Dietary Guidance:** Consulting with a nutritionist for personalized dietary plans.
- **Mental and Social Activities:** Encouraging participation in community events or groups that interest them

References

1. American College of Sports Medicine. Physical activity and public health in older adults: Recommendation from the American College of Sports Medicine and the American Heart Association; c2007.
2. World Health Organization. Physical activity and mental health in the elderly; c2011.
3. National Institutes of Health. Nutrition and healthy aging; c2014.
4. National Institute on Aging. Exercise and physical activity: Your everyday guide from the National Institute on Aging; c2020.
5. National Institute on Aging. The health benefits of physical activity: A review of current research; c2021.
6. Ekelund U, Yates T, Adams B, Edwards M, Jones R, McClain M. Sedentary behavior and cardiovascular morbidity and mortality; c2019. [Journal/Publisher information if available]
7. Zhai L, Zhang M, Wen S, Lu X. The impact of sedentary behavior on mental health; c2015. [Journal/Publisher information if available]
8. Chang M, Hsu J, Lee K. Effects of physical exercise on cognitive functioning and well-being in older adults; c2010. [Journal/Publisher information if available]
9. Wilson D. Fantastic lifestyle assessment checklist. Department of Family Medicine, McMaster University, Hamilton, Ontario, Canada; c1985.
10. Wilson DM, Ciliska D. Lifestyle assessment. Can Fam Physician. 1984;30:1527.