

Health Related Lifestyle Layout Expressed by Adolescents in Dubai

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Abstract

Background: According to WHO, adolescent is a person between the ages 10 and 19 years. Time of adolescence is exceptional for teenagers, as a lot of fundamental changes started in this stage, such changes affecting physical, mental, emotional and social aspects of teenager. Transition from the period of childhood to period of adulthood embraces a lot of stresses encountered by youngster through 3 consecutive stages of adolescence. **Objectives:** To study the health related life style characteristics of adolescent population in Dubai. **Methodology:** Cross sectional study was carried out in governmental and private secondary schools of Dubai, UAE, among Secondary school students, grades (10-12), both males and females. Students aged 20 years or more were excluded. The minimum sample size required was 888 students. A Multistage stratified random sampling was carried out. The stratification was based upon region (Bur Dubai and Deira), type of school (governmental and private secondary schools) and sex (males & females). **Results:** In regard to physical activity, majority of students (45.4%) reported less than one hour exercise in the week. Regarding extra-curricular activities in school, only 31.2% of students have such activities. Presence and practice of hobbies was noted in 92.3% of students. In regard to smoking, it was noticed from the table that 13.3% of students were smokers (either current or past), while 40% of students reported exposure to smoking from others (passive smoking **Conclusions:** Health related life style among Dubai adolescent population significantly characterized with multiple non healthy behaviors and affected by modern life style deviations.

Keywords

Lifestyle, Adolescents, Dubai

Received: May 24, 2015 / Accepted: May 30, 2015 / Published online: August 2, 2015

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1. Introduction

Adolescence is a transitional stage of physical and mental human development, generally occurring between puberty and adulthood (age of majority), largely characterized as beginning and ending with the teenage stage.¹ According to WHO, adolescent is a person between the ages 10 and 19 years.² Time of adolescence is exceptional for teenagers, as a lot of fundamental changes started in this stage, such changes affecting physical, mental, emotional and social aspects of teenager.³ Transition from the period of childhood to period

of adulthood embraces a lot of stresses encountered by youngster through 3 consecutive stages of adolescence; early, middle and late.⁴ It is characterized by the rapid physical growth and hormonal development; which is distinctive for males and females, the rapid growth is noticed with the onset of puberty, manifested in bone, muscle, brain, sexual characteristics, and stature. These changes coincide with social and emotional growth, revealed in awareness of others, social consciousness, sense of purpose, personal identity, peer bonding, and intense emotions.^{5,6}

While this category of population can be seen apparently to

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have a relatively healthy period of life, they are well-known to be susceptible to variable disorders through their maturation; profoundly in regard to motional maturation, in which they can be vulnerable to mood disorders, in particular to depressive disorders, like major depressive disorder and dysthymic disorder.⁷ Adolescent depression is a common occurring condition, with reported prevalence in community-residing youth between 0.4% and 8.3% and lifetime prevalence (during adolescence) between 15% and 20%.⁸

Studies showed that incidence of depressive disorders markedly increases after puberty. At any given time, between 10 to 15 percent of adolescent population have some symptoms of depression, in which five percent of them can meet the criteria to be diagnosed as having major depressive disorder and another three percent as having dysthymic disorder.⁹

2. Objectives

To study the health related life style characteristics of adolescent population in Dubai.

3. Methodology

Cross sectional study was carried out in governmental and private secondary schools of Dubai, UAE, among secondary school students, grades (10-12), both males and females. Students aged 20years or more were excluded.

Using the computer program EPI INFO "6.04", based on total number of secondary school students of 34299 in Dubai, using 3% degree of precision, an estimated prevalence of 17% 35, 1.5 design effect and 95% confidence limits, the minimum sample size required was 888 students.

A Multistage stratified random sampling was carried out. The stratification was based upon region (Dubai is classified into two main geographic areas Bur Dubai and Deira), type of school (governmental and private secondary schools) and sex (males & females). A list of schools was obtained from knowledge and human development authority.

4. Results

Table (1) clarifies the life style of the study sample of secondary school students. In regard to physical activity, majority of students (45.4%) reported less than one hour exercise in the week. Regarding extra-curricular activities in school, only 31.2% of students have such activities. Presence and practice of hobbies was noted in 92.3% of students. In regard to smoking, it was noticed from the table that 13.3% of students were smokers (either current or past), while 40% of students reported exposure to smoking from others

(passive smoking)

Table 1. Distribution of the study sample of Secondary school students according to life style, Dubai 2011.

Life style	Category	No (n = 1289)	%
Physical Activity	no or less than 1 hour per week	585	45.4
	1-2 hours per week	207	16.1
	3 hours or more per week	497	38.6
School extra-curricular activities	No	887	68.8
	yes	402	31.2
Hobbies	No	99	7.7
	yes	1190	92.3

Table (2) describes the exposure of the study sample of secondary school students to physical and verbal abuse through any of their parents. In regards to exposure to physical abuse, 11.8% of students reported such exposure from any of parents. Another exposure to verbal abuse was reported from 26.2% of students.

Table 2. Distribution of secondary school students according to exposure to physical and verbal abuse through their parents, Dubai 2011.

Physical and Verbal abuse	Category	No (n = 1289)	%
physical	No	1136	88.1
	Some times	124	9.6
	Frequently	29	2.2
Verbal	No	951	73.8
	Some times	286	22.2
	Frequently	52	4.0

Table (3) describes psychological supports among the study sample of secondary school students. Family psychological support was described to be available continuously for 50% of students, whereas 7.6% of students reported absence of family support. Majority as 87.4% of students reported availability of psychological support provided through their close friends

Table 3. Distribution of study sample of secondary school students according to psychological support, Dubai 2011.

psychological Support	Category	No (n = 1289)	%
Family psychological support	No	98	7.6
	sometimes	547	42.4
	always	644	50.0
Close friends psychological support	No	162	12.6
	yes	1127	87.4

Figure (1) demonstrates the distribution of the study sample of secondary school students according to body mass index. The figure showed that, 31.8% of students are in the categories of overweight and obesity.

Figure (2) describes the distribution of the study sample of secondary school students according to stressful life events. 44.9% of students counted such exposure to death or loss of a relative or close friend in the past year.

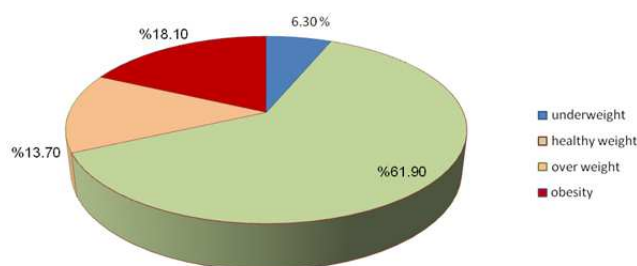


Figure 1. Distribution of the sample of secondary school students according to body mass index, Dubai 2011.

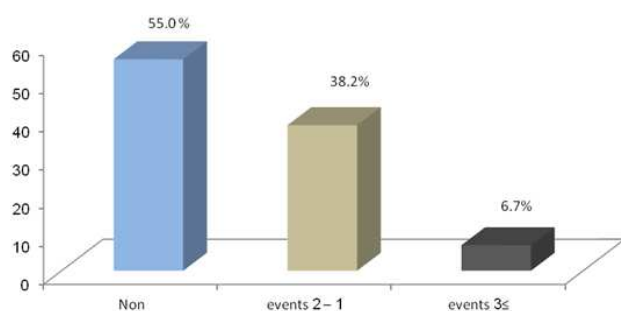


Figure 2. Distribution of the study sample of secondary school students, according to stressful life events (Death or loss of relatives or close friends), Dubai 2011.

5. Discussion

Participants in the study were 1289. They were selected to represent two areas of Dubai and both private as well as governmental schools. Different regional and international studies have recruited different sample sizes. A national Omani study in 2004 has recruited 5409 students,¹⁰ in 2005 in KSA, a study conducted on the subject through using 490 students,¹¹ while 1144 students were recruited in similar study in china conducted in 2007.¹²

Nearly equal numbers were taken from the two main parts of Dubai. This was because of the presence of nearly equal population in these two areas. Private school students are 4 folds more than governmental school students, so they contributed to the selected sample in the same proportion they are in secondary students' population.

The sample was distributed between the ages from 14 to 19 years. Age of adolescents is from 10 to 19 years old according to WHO.² The age group from 14 to 19 was taken, because of time limitation and simplicity to deal with secondary school adolescents. There was proportionate representation of females and males in the sample. This was because the similar representation in the population. Local students composed one fourth of the sample. This was because Dubai is international city in which a lot of nationalities are there.¹³

In concern to the sibling's number, it was noticed that the majority of students have less than 6 siblings. This is an

important factor in family constitution that can affect mental status of the students. With large sibling's size there will be lower allocations of care time from both parents. Siblings will be also more likely to grow up in economic adversity, and, as a consequence, they can suffer relatively poor health outcomes.¹⁴

Most of students' parents were educated to the higher level. Most of them were working. The issue can reflect the socio-economic level of families, in which it is of important value in exposing adolescents to circumstances that may participate in mental health development. Studies confirmed the importance of family socio-economic level on maintaining positive conditions that can enhance positive mental status of children and adolescents.¹⁵

In majority students, parents are living together. Also the majority of the students were residing with both of their parents. Almost four in five adolescents were satisfied through documenting good relationships with their parents. Such gathering and relationships are good indicators for family dynamics which can affects the growth of adolescent through offering more needed care. In addition, presence of harmonious relationships can ensure the stability of the family and be a protective factor against life stresses.¹⁶⁻¹⁸

Disconnection of parents was found in 5% of students, the issue which can lead to disruption of family attachment and impose inverse effects on adolescent's mental status.^{19,20} Almost half of students documented the presence of conflicts between their parents. One from every 20 student was able to observe frequent conflicts between parents. Conflicts are known to be present everywhere, but one of the essential skills that should be practiced by parents is how to hide such conflicts from adolescents, to protect them from any emotional deviation in the future. Studies had recognized possible effects that can lead to forthcoming psychiatric problems among adolescents.²¹

Regarding relationships of adolescents with their siblings, the majority acknowledged good relationships with their siblings. Positive relationships are essential for maintaining coherence between siblings. Literature showed that positive relationships are essential for maintenance of psychological wellbeing of adolescents especially through provision of support when stressful life events are confronted.²²

In school environment, two thirds of students have good relationships with their teachers. Also majority of students documented good relationships with colleagues. Such positive relationships are needed in school, as this environment is the second home for adolescent to grow up. In schools, students need to find support to face changes of adolescents, also they need to find connectedness which help in establishing emotional communications. It was found

through research that school environment including (teachers and colleagues) is an important social environment for adolescent mental health. In reference to psychological support, only half of students are offered continuous psychological support from their families. This figure need to be augmented, as psychological support is one of the vital components needed by adolescents through their maturation. In addition, four of every 5 students perceive psychological support from friends. Psychological support from family and friends is essential; this fact has been assured by researches, as they clarify the need for support as guard for mental wellbeing.^{23, 24}

At least one from every ten students is exposed to some form of physical abuse from parents. This exposure is worrying, especially that a percent of 2.2 are exposed frequently. Studies revealed that such exposure to physical abuse is correlated with adverse mental health.^{25, 26}

One quarter of students documented exposure to verbal insults from their parents. Verbal insults are taking to be a form of verbal abuse which leads at the end to emotional abuse of the adolescent. Such exposures are negatively associated with mental health of adolescents. It was documented that emotional abuse is connected with self-worthlessness and hopelessness. Near half of students exposed last year to a stressful life event in the form of death or loss of relative or close friend. It is normal that our life is full of stressful events, which amplify the need for presence of coping strategies that can protect from their possible impacts. It is well known that stressful events can lead to development of psychopathology if not properly managed.^{27,28}

6. Conclusion

Health related life style among Dubai adolescent population significantly characterized with multiple non healthy behaviors and affected by modern life style deviations. Adolescent health program needs to be effectively developed to address the high risky life style layout among adolescent population in Dubai.

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