IDENTIFYING HEALTH PERCEPTIONS OF STUDENTS OF HEALTH PROGRAMS AT COMMUNITY COLLEGE AND COMPARING THEM WITH THE ONES OF STUDENTS OF OTHER PROGRAMS

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Abstract

The aim of this research is to identify health perceptions of students of the health programs at Community College, Okan University, and compare the results with those of students of other programs. The data is also analyzed with respect to the variables such as gender, age, place of birth, and type of high school. The data was collected according to the "Perception of Health Scale" developed by Diamond at al 2007. The scale was translated from English to Turkish using the back-translation technique. The validity of the scale was tested by using factor analysis, and content-scope validity and reliability were tested with item-total score correlation, internal consistency and continuity methods by Kadıoğlu and Yıldız. The Perception of Health Scale is a quintet quintette likert type scale composed of 15 items and four sub-factors. The minimum score is 15 points and the maximum point is 75 on this scale. The Cronbach's Alpha coefficient is 0.77 and Pearson's correlation coefficient is 0.78. The scale has four factors, i.e. the control center, self-awareness, certainty, and significance of health. The questionnaire was applied to 180 students studying in the Health Programs Group (Medical Documentation and Secretaryship, Opticianry, Medical Promotion and Marketing, Health Institutions Management), 98 students studying in Technical Programs Group (Computer Programming, Graphic Design, Food Technology, Occupational Health and Safety, Survey and Cadastre, Construction Inspection), 39 students studying in Management Programs Group (Banking and Insurance, Accounting & Tax Applications, Call Center Management, Business Management, Maritime and Port Management), 54 students studying in Other Programs (Human Resources, Legal Studies, Radio and Television Programming, Public Relations). Research data is analyzed by the SPSS software program. The data is assessed by

frequency distribution, t-test. The results are interpreted by taking the students' demographic characteristics and programs into account.

Keywords: *Perception of Health, Department of Medical Services and Techniques.*

1. Introduction

People's health behaviors is associated with their perception of health. How they perceive the health, which attitude and behaviors is related to be healthy will effect the person to sustain a healthy life. The knowledge of health beliefs and behaviors of a society is important for the delivery of health services, health education and policies in terms of giving direction. Period of university is a period when individuals experience a lot of change. The period of life of young people that are separated from their families by getting in a university has a great importance on how they perceive the health. During this period gained health behaviors and attitudes influence their later life. There has been a lot of studies on the measure of perceived health and these studies shows that there are a lot of factors that increase and reduce the perception of health.

Doğanay ve Uçku (2012) studied on 1382 people aged between 65-84 years who concluded that individuals with high perception of health have low coronary events and death(Doğanay and Uçku 2012). Because of the importance given to health is high, it reduces the level of chronic diseases are seen.

Açıksöz et al. (2007) As a result of their research with 361 nursing students; A majority of the students perceived their health as "good" and it was found to be that their belief to control their future health was "too much" (Açıksöz et al, 2007). According to the health belief model, perception of health status is directly related to the development process of healthy behaviors and attitudes of individuals and in maintaining (Bottorf et al, 1996).

Koçoğlu and Akin (2009) has studied on 400 individuals, that has emerged that healthy lifestyle behaviors and socio-economic level of healthy lifestyle behaviors in studies examining the relationship with the quality of life adversely affected as a result.

When we look at the components of socio-economic status, low economic income, socio-economic aspects of living in disadvantaged neighborhoods, inability to have health insurance, the increasing number of individuals in the household, the village is the birthplace and so on. components are occurred (Koçoğlu and Akın, 2009). A study that has revealed an impact on the perceived level of health of socio-economic level and healthy lifestyle, Simsek et al. (2011) studied on 307 university students, health perception of economic status, place of living is found to be associated with healthy lifestyle(Şimşek et al, 2011).

Araz et al. (2007) when the results obtained from 1000 individuals in their study considered as a whole it can be said to be based on everyday knowledge and scientific knowledge in the minds of individuals. Also about %40 of "be healthy" sampling represents the definition of the WHO in

the same manner and health is correctly identified by those individuals according to universal knowledge. Up to 20% of the people who participated in the study already has a health problem. People doubt their own health status is not based on medical criteria, are determined by their subjective perceptions. Only 1.1% of people consider their health status as poor, it shows that even there is any illness requiring medical treatment, their health may not be perceived bad. This situation can be explained by the concept of subjective well-being. Although people have a disease, they can continue to feel good about themselves(Araz et al, 2006).

Gökmen et al. (2007) study on 270 workers who work in a tobacco factory; 83% of workers perceive their health status as good but due to work at the factory 71.2% of workers perceived the risk of getting a disease was male, while 28.8% were female. A significant difference between gender and perception of the risk of getting a disease was found(Gökmen et al, 2007).

Tuğut and Bekar (2007) study on 1001 college students; examining the relationship between college students' perceptions of their health status and Healthy Lifestyle Behaviors, when it is analyzed according to the alcohol use of college students, non-alcohol user's mean score of health perception was higher(p<0.05). The level of health perception of individuals that can develop a healthy lifestyle is increasing (Tuğut et al, 2007).

Goodwin and Engstrom (2002) in their study, a relationship has been identified between personal factors and significantly poor perception of health. In particular, it is determined that people who open to innovation and outgoing, have high health perception. Health perceptions of people living with emotional instability was found to be low(Goodwin and Engstrom, 2002).

Zaybak and Fadıllıoğlu (2004) in their study, health promoting behaviors of college students that are in health programs and students that are not and in order to determine the factors that influence these behaviors in the work they perform, there was no significant statistical difference between health program students and non-health program students. Students perceive their health status higher, so it will keep their health beliefs under control in the following years and it is reported that will positively affect healthy lifestyle behaviors(Zaybak and Fadıllıoğlu, 2004).

Ünalan et al. In 2007 a study on students studying in the health and social programs in vocational high school, relationships between healthy lifestyles and self-caring is examined, as a result students in health programs could not gain positive health behaviors, even they had, they could not bring it into practice(Ünalan et al, 2007)

It is shown that health perception is affected by socio-economic status, personal characteristics, the presence of a chronic disease, the working environment, mental health, educational level and so on. In our study, we have compared the health perception of the students who are studying in technical departments and health departments in vocational school. Our goal is to determine the level of health perception among students in two different areas of health perception and determine whether there were differences in the level. Determining the level of

health perception of individuals who will be employed in the health field is important data for that it could affect the society.

2. Methods

Research has been done in vocational school located within the boundaries of Okan University Hasanpaşa campus. The universe of study is constituted from 371 students who are studying in the 2012-2013 academic year in Okan University in Hasanpaşa. 180 students participated in the research study at vocational schools are part of the health-related program. 191 students study vocational programs relating to technical and managerial program.

In the research health programs students' health perception results compared to students that are in other programs. The health perception scale developed by Diamond and colleagues in 2007, was applied to students who participated in the survey. Minumum point is 15, maximum point is 75. There are four factors are discussed in the scale. These are; control power on health, self-awareness, accuracy and importance of health. It is obtained that statistical analysis of survey data from students in the Health Program and Technical Program students separately showed normal distribution of the data. Therefore, parametric tests were utilized in the analysis of data. In addition, because the groups have homogeneity of variance, one-way analysis of variance was applied. To check the suitability to normal distribution of data a single sample Kolmogorov-Smirnov test was applied.

The research has been approved by the institution and students' participation in the study has been taken as "voluntary".

3. Results

3.1. Comparison of Averages between Health Program and Technical Program

Single Sample Kolmogorov-Smirnov test has been applied to check the suitability of data to normal distribution. Normal distribution has been observed separately from the data obtained from the students of Health Program and the students of Technical Program. Therefore, parametric tests have been used in the analysis of data. In addition one-way analysis of variance has been applied because the groups have homogeneity of variance.

TABLE I. Health Programs and Technical Programs Health Perception Test Averages

Group	N	Means	Std.Deviation	Sd	t	p
Health Programs	184	36,35	6,287	373	-9,812	0,00
Technical Programs	191	43,96	8,530			

When health perception scale results of the health programs and technical programs have been compared, there has been a significant difference between the averages of groups according to the t-test results(t_{372}=-9,812:p<0,05). When the averages of programs has been observed (X_{health}= 36,35; $X_{technical}$= 43,96:X_{max}=75) the average of each group was low and the difference between averages was seen to be in the favor of technical programs.

TABLE 2. Health Perception Test Averages of the First and Second Year Students Studying in Health Program

Group	N	Means	Std.Deviation	Sd	t	p
First Year	115	35,91	5,337	181	-1,145	0,00
Second Year	68	37,01	7,642			

When the health perception scale results of the first and second year students in health program have been compared, there has been a significant difference between the averages of groups according to the t-test results(t_{181}=-1,145:p<0,05). When the averages of programs has been observed ($X_{1.year}$= 35,91; $X_{2.year}$= 37,01:X_{max}=75) the average of each group was low and the difference between averages was seen to be in the favor of second year students.

TABLE 3. Health Perception Test Averages of the First and Second Year Students Studying in Technical Program

Group	N	Means	Std.Deviation	Sd	t	p
Firs Year	130	44,14	8,650	189	0,471	0,638
Second Year	60	43,52	7,82			

When the health perception scale results of the first and second year students in technical program have been compared, there has not been a significant difference between the averages of groups according to the t-test results(t_{189}=0,471:p>0,05). When the averages of programs has been observed ($X_{1.year}$= 44,14; $X_{2.year}$= 43,52:X_{max}=75) the average of each group was low and no difference between averages was seen.

When Table 2 ve Table 3 has been analysed, the difference of averages between first year students in technical programs and health programs was seen to be in the favor of technical programs($X_{1.y. technical}$ = 44,14, $X_{1.y.health}$ = 35,91). And when Table 2 ve Table 3 has been analysed, the difference of averages between second year students in technical programs and health programs was seen to be in the favor of technical programs($X_{2.y. technical}$ = 43,52 $X_{2.y.health}$ = 37,01).

TABLE 4. Health Perception Test Comparison of Average of the Students in Health Program

Programs	N	Mean	Standart Deviation	Sd	F	p
Medical Documentation and Secretarial Work	92	34,78	5,494	3	26,656	0,00
Medical Promoting and Marketing	7	45,00	6,000			
Optician	57	34,49	4,326	183		
Health Institutions Management	28	43,34	6,076			

When Table 4 has been analysed, a significant difference of averages of health perception scale was seen between students majoring in four different programs($F_{(2,104)}$=26,656:p<0,05)

4. Discussion and Conclusion

According to the research results; Technical program students' health perceptions is higher than health program students' health perceptions. This finding is unexpected because it is desirable to have a high health perception from individuals who will practice in health profession The reason of Health perceptions of students pursuing health programs is low can be explained with many factors. We can interpret the results presented in the study related to health perception.

Many of the students who attend health programs staying in dormitaries away from their family, and most of the students have come to study from smaller provinces outside the City to a big city like Istanbul(Şimşek et al;2011) According to the results of research conducted by Simsek et al. the students living in dorms or separate from the family health perception were significantly lower than those living with a host family

In the study of Ünalan et al. the self-realization in dormitories and feeding scores were lower(Ünalan et al, 2007). Compared to who staying with family have more opportunities than in dormitories. In particular, they have more chance doing physical activity.

In our study, students studying in health programs also have similar conditions so the low level of perceived health can be attributed to this cause. Another reason of low level of perception of the health program students might be affected is that health awareness content is taught in the 3rd semester of the course.

Tambağ and Turan (2007) in their study, the analysis of health lifestyle behaviors of students studying nursing who took Public Health Nursing course, it is seen that there is a significant increase of resposibility of health of students that took the course(Tambağ and Turan, 2007).

When we compare the First-year and second-year students in health programs, health perception of the second year students are higher than the first-year students.This result shows that health perceptions of students in health program is improved. The Reason of this increase is health awareness lectures started to be taught in 3rd semester.

Health perception of students in this program have shown improvement with the education they had. Also At the end of the first year the students of the health program do their summer internship at a hospital which is effective to the promotion of their health perception.

This finding supports the technical program students studying in the first grade and second grade, when we compare the perception of the health of the students, it has not shown a significant difference in health perception.

In this case, the cause of the increse of health services vocational school students' health perception is vocational education. When health perceptions of health programs are compared, the medical promoting and marketing has the highest perception of the health. However, the group having the lowest average of health perception seems to be opticianry.

In another study It was observed that the Optician program students thinks that their program is not associated with health.

In addition, this research shows that the reason of opticianry program students choosing the program is to be able to start a business (Özdemir, 2013).

In particular, given the importance of vocational training, such as vocational schools students develop attitudes to their health assesments, assigning tasks to ensure the continuity of these attitudes and behavior, ensuring the raise of perceived health in a positive way. In the future the candidate students' low result of the data is important for public health.

Education curriculum should be developed, taking other factors into consideration that reduce the perceived health of the students taking part in projects can reinforce a healthy lifestyle should be provided.

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