Knowledge and practices on selected non communicable diseases among GCE Advanced Level students in state schools, Maharagama

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Objective

To assess the knowledge on selected non communicable diseases (NCDs) and practices related to prevention of selected NCDs among GCE Advanced Level (A/L) students attending government schools in the Maharagama education division.

Methods

A descriptive cross sectional study was conducted among year 13 students (A/L) attending state schools in Maharagama education division. A total of 634 students were selected from 9 schools which had at least one class in a given stream. Stratified sampling was done according to stream of study and the number needed from each stratum was decided according to probability proportionate to size. Cluster sampling was conducted when the number of classes in each stream was more than one. A self administered questionnaire was used to gather information on socio demographic data, practices, knowledge on NCDs and sources of information. Height and weight measurements were recorded. Each practice was analysed separately, either based on the indulgence or on a cut off score. A composite score of >60% was considered as good overall knowledge.

Results

Of the 634 respondents 45.3% (n=287) were males. The mean age was $18.4(SD\pm0.38)$ years.

Knowledge: The proportion with good overall knowledge was 43% (95%CI: 39%-46.9%) [n=272]. Good overall knowledge was significantly higher among non Sinhalese (88%; n=5) and science stream students (65%; n=85) (p< 0.001).

Practices: Proportion of students who had a healthy diet was 43% (n=275) and adequate physical activity was 20% (n=129). Three percent (n=18) were current smokers, all of whom were males and 10% (n=61) of males and 2% (n=12) of females were current users of alcohol. Proportion of females was significantly higher in relation to healthy dietary habits (52.2%; n=181 versus 32.8%; n=94), non smoking (100%; n=347 versus 93.7%; n=269) and non alcohol consumption (96.5%; n=335 versus 78.7%; n=226) and males in relation to adequate physical activity (27.5%; n=79 versus 14.4%; n=50). Schools (41%; n=233) were the major source of information on NCDs and preferred sources were healthcare workers (34%; n=201) and schools (32%; n=192).

Conclusion

Proportion of year 13 A/L students with good knowledge and practices was low and recommend awareness raising programs.