

Research Paper

Relationship Between Health Promoting Lifestyle and Quality of Life among Late Adolescence: A Correlational Study

Ms. Prapti Bhattacharya^{1*}, Dr. Anita Gupta², Mr. Mrityunjay Bandyopadhyay³

ABSTRACT

Health-promoting lifestyle has been defined as a multidimensional pattern of self-initiated actions and perceptions that serve to maintain or enhance the level of wellness, self-actualization, and fulfillment of the individual. Quality of life (QOL) refers to a person's sense of well-being, encompassing all aspects contributing to their subjective satisfaction, such as physical health, psychological state, social relationships, and relationship to salient features. This study explores the relationship between Health-Promoting Lifestyles (HPL) and Quality of Life (QOL) among late adolescents. A correlational study was conducted to examine how HPL impacts the QOL in adolescents. The Health-Promoting Lifestyle Profile II (Walker, Sechrist, & Pender, 1987) and the Quality of Life Scale (Sharma & Nasreen) were used in the study. Pearson product-moment correlation was employed using SPSS and MS Excel to investigate the relationship between HPL and QOL. The study identified a statistically significant positive correlation between Health-Promoting Lifestyle (HPL) and Quality of Life (QOL) among late adolescents, with males showing a slightly stronger association than females. These results emphasize the crucial role of health-promoting behaviors in improving quality of life.

Keywords: *Health-Promoting Lifestyle, Quality of Life, Late Adolescence, Well being*

Adolescents play a very active role in their own growth process. Even after gaining knowledge, they need help in difficult and challenging situations (The Promise of Adolescence: Realizing Opportunity for All Youth. Washington (DC): National Academies Press (US); 2019 May 16). Adolescence lasts from ages 10 to 19, and it is a crucial time to establish the groundwork for long-term health (WHO, 2019). There are three developmental stages of adolescence: early adolescence (10 to 13 years), middle adolescence (14 to 17 years), and late adolescence (18 to 21 years and beyond) (CSU, Long Beach, 2006-11-08).

Health

Health is a positive concept emphasizing social and personal resources, as well as physical capacities. It means that health is a resource to support an individual's function in wider

¹Student, Amity university Chhattisgarh

²Assistant Professor, AIBAS, Amity University Chhattisgarh

³Student, National Forensic Sciences University, Gandhinagar, Gujrat

*Corresponding Author

Received: June 07, 2024; Revision Received: July 17, 2024; Accepted: July 20, 2024

Relationship Between Health Promoting Lifestyle and Quality of Life among Late Adolescence: A Correlational Study

society rather than an end in itself (WHO, 1986). Health is the cornerstone of sustainable development and a fundamental right that supports societal progress and individual well-being. Helping adolescents to establish healthy lifestyles and avoid developing health-risk behaviors is extremely important and should start before these behaviors are firmly established (Raj, S., Senjam, S.S., & Singh, A., 2013).

Health-Promoting Lifestyle

A health-promoting lifestyle has been defined as a multidimensional pattern of self-initiated actions and perceptions that serve to maintain or enhance the level of wellness, self-actualization, and fulfillment of the individual (Pender et al., 2006). It encourages proactive measures to maintain physical, mental, and social health, empowering individuals to take control of their own health outcomes. Some of the most important components of a health-promoting lifestyle include adequate sleep, a balanced diet, regular physical activity, avoiding harmful substances, stress management, and maintaining social connections, which help us to live better, healthier, and more fulfilling lives.

Quality of Life

QOL refers to a person's sense of well-being, including all aspects contributing to their subjective satisfaction, such as physical health, psychological state, social relationships, and relationship to salient features (WHO, 2004). The WHO Quality of Life Group defined QOL as an individual's view based on their position with respect to the culture and value system in which they live, shaped by their aspirations, ambitions, and goals (Rezaeipandari et al., 2015). Quality of life is a concept aimed at capturing well-being, whether individual or population-based, regarding both positive and negative elements within the entirety of existence at a specific point (Teoli, D., 2023).

Relationship between HPL and QOL

The relationship between health-promoting lifestyle (HPL) and quality of life (QOL) is both bidirectional and multifaceted. By adopting behaviors that enhance physical health, mental and emotional well-being, and social connections, individuals can significantly improve their overall quality of life, leading to greater happiness and satisfaction. Prioritizing health is crucial for enhancing quality of life across various domains. Positive experiences and benefits, such as increased energy, reduced pain, and better relationships, underscore the importance of maintaining healthy habits. This creates a positive feedback loop where improved quality of life fosters continued adherence to health-promoting practices, further enhancing well-being.

Samiei Siboni, Alimoradi, and Atashi (2018) conducted a study to investigate the connection between the quality of life of hypertension patients and their health-promoting behaviors. This cross-sectional study, involving 93 patients at a cardiology clinic in Iran, evaluated their QOL and HPL. The results indicated that the HPL scores were moderate and showed a positive correlation with QOL.

Jeoung (2022) examined the relationship between health-promoting lifestyle and quality of life among 254 parents of children with intellectual and developmental disabilities. The assessment utilized the Korean version of the health-promoting lifestyle profile, developed and revised by Jeon et al. (2007), and the quality of life scale by Lee (2002). The study found an association between QOL and the six subscales of HPL in parents of children with intellectual disabilities.

Relationship Between Health Promoting Lifestyle and Quality of Life among Late Adolescence: A Correlational Study

Tol, Tavassoli, and Shariferad (2013) explored the relationship between health-promoting lifestyle and quality of life among undergraduate students at the School of Health, Isfahan University of Medical Sciences. This cross-sectional study used a census method to collect data from undergraduate students, employing the health-promoting lifestyle profile two and the Persian version of the QLQ-C30 questionnaire. The findings revealed a correlation between spiritual development, overall quality of life, stress management, and health-related quality of life, although there was no significant connection between global quality of life and other aspects of health-promoting lifestyle.

Mak et al. (2008) investigated the relationship between socio-economic status, health-promoting lifestyle, and quality of life among Chinese nursing students. A cross-sectional survey was conducted using the HPL profile, health risk behavior, quality of life, and socio-economic status questionnaires. The study found that participants performed best in the interpersonal relations dimension of health-promoting lifestyle and worst in the physical activity dimension of both the health-promoting lifestyle and quality of life scales.

Senol, Ünalın, et al. (2014) conducted a cross-sectional study to examine the relationship between health-promoting behavior and quality of life of elderly individuals living in nursing homes in Kayseri. The standardized mini-mental test, HPLP, and WHOQOL old module were used in the study. There was a positive correlation between overall WHOQOL old scores and HPL scores.

Amirabadizadeh and Sharifzadeh (2016) explored the relationship between middle-aged women's quality of life and health-promoting lifestyle. This descriptive and analytical study, conducted on 290 middle-aged women, used the health-promoting lifestyle profile 2, a 36-item quality of life questionnaire, and a demographic questionnaire. The results indicated a positive relationship between health-promoting lifestyle and quality of life in women, with an inverse relationship between age and QOL.

Wang, Kuei-Ying, and Chien (2023) conducted a cross-sectional study on 518 nurses in a Taiwanese teaching hospital to examine whether health-promoting lifestyle mediates the relationship between self-perceived health status and quality of life among nurses. The study used the self-perceived health questionnaire, the medical outcomes study 36-item short form health survey, the Taiwan version of the health-promoting lifestyle profile, and the World Health Organization quality of life survey. Results indicated that the overall quality of life of nurses was moderate and highly correlated with HPL.

Rakhshani, Shojaiezadeh, et al. (2014) conducted a cross-sectional study on 500 elderly individuals aged 60 years and above in Iran to examine the association between QOL and HPL. The Farsi version of the short form health survey questionnaire and the health-promoting lifestyle profile 2 were used. The study found significant differences in QOL based on sex, age, education, and marital status, and a significant association between HPL and QOL in the elderly.

Objectives

- To assess the association between HPL and QOL among late adolescents.
- To examine relationship between HPL and QOL among males and females.

Relationship Between Health Promoting Lifestyle and Quality of Life among Late Adolescence: A Correlational Study

Hypothesis

- H₀₁- There will be no significant relationship between HPL and QOL among late adolescents.
- H₀₂- There will be no significant relationship between HPL and QOL among males and females.

METHODOLOGY

The present study is correlational research. It focused on two important construct Health promoting lifestyle and quality of life.

The study goal is to study relationship between health promoting lifestyle and quality of life among late adolescence. The data is collected in online mode via google form from normal population aged 18-30.

- **Independent Variable-** Health Promoting Lifestyle
- **Dependent variable-** Quality of Life

Sampling Method – The data was collected from 100 people (50 males 50 females) of age group 18-30 using convenience sampling method.

N= 100

Inclusion Criteria – Age between 18- 30 years, Participant can be from any state of India

Exclusion Criteria - Middle adults below 18 and above 30. Person with any kind of chronic illness such as thyroid, diabetes, Blood pressure and mental illness

Instrument Used

- **Health promoting lifestyle profile 2 (HPLP-2)**- Health promoting lifestyle profile 2 developed by walker, SN., Sechrist, K.R & Pender, N.J. (1987) was used for collecting data regarding health promoting behavior. It has total 52 items with 6 six dimensions. six dimensions are as follows spiritual growth, Physical activity, Interpersonal relation, Nutrition, Health responsibility and stress management.
- **Quality of Life Scale** - QOL was given by Sarika Sharma, research scholar, Department of education, Aligarh Muslim University, ALIGARH (U.P) and Dr Nakhat Narseen, Associate professor, Department of education Aligarh Muslim University ALIGARH (U.P) published by National Psychological Corporation. This scale comprises of total 42 items out of which 8 are negative items and 34 are positive items. The scale is 3 point likert scale with option always, Seldom and Never.

Procedure

The researcher collected data using online mode. Online data was obtained from students of various states representing various departments. The researcher contacted different people through phone and provided brief explanation of research study and objectives. Interested participants were provided with Google form individually. The participants were asked to accept the consent and provide demographic details before giving any specific instructions. Questionnaire were circulated in different states of India through WhatsApp, Instagram messenger, LinkedIn.

Relationship Between Health Promoting Lifestyle and Quality of Life among Late Adolescence: A Correlational Study

Statistical Analysis

Statistical analysis was performed using MS Excel and SPSS software. Pearson correlation was used to determine whether there is a correlation between health-promoting lifestyle and quality of life among late adolescents.

RESULT & INTERPRETATION

Table 1: Correlational Analysis HPL & QOL

		Health Promoting Lifestyle	Quality of Life
Health Promoting Lifestyle	Pearson Correlation	1.000	.474*
	Sig. (2-tailed)		.000
	N	102	102
Quality of Life	Pearson Correlation	.474*	1.000
	Sig. (2-tailed)	.000	
	N	102	102

*Significant at .05 level

In the correlational analysis between Health Promoting Lifestyle (HPL) and Quality of Life (QOL), a statistically significant positive association was found, $r(102) = .474$, $p < .05$. This indicates that individuals who engage in health-promoting behaviors tend to report higher levels of quality of life. Therefore, the null hypothesis "There is no significant relationship between HPL and QOL" is rejected.

Table 2 Correlational analysis among males

		Health Promoting Lifestyle	Quality of Life
Health Promoting Lifestyle	Pearson Correlation	1.000	.508*
	Sig. (2-tailed)		.000
	N	50	50
Quality of Life	Pearson Correlation	.508*	1.000
	Sig. (2-tailed)	.000	
	N	50	50

*Significant at .05 level

Table 3 Correlational analysis among females

		Health Promoting Lifestyle	Quality of Life
Health Promoting Lifestyle	Pearson Correlation	1.000	.435*
	Sig. (2-tailed)		.001
	N	52	52
Quality of Life	Pearson Correlation	.435*	1.000
	Sig. (2-tailed)	.001	
	N	52	52

*Significant at .05 level

In the correlational analysis among males, there is a statistically significant positive association between Health Promoting Lifestyle and Quality of Life, $r(50) = .508$, $p < .05$.

Relationship Between Health Promoting Lifestyle and Quality of Life among Late Adolescence: A Correlational Study

This indicates that among males, engaging in health-promoting behaviors is positively related to experiencing a higher quality of life. Similarly, in the correlational analysis among females, there is also a statistically significant positive association between Health Promoting Lifestyle and Quality of Life, $r(52) = .435$, $p < .05$. This suggests that among females as well, engaging in health-promoting behaviors is positively associated with a higher quality of life.

Comparing the correlation coefficients between males and females, it appears that gender may moderate the association between Health Promoting Lifestyle and Quality of Life. Although both males and females exhibit a positive correlation between these variables, the correlation coefficient is slightly stronger among males ($r = .508$) compared to females ($r = .435$). This suggests that the relationship between engaging in health-promoting behaviors and experiencing a higher quality of life may be somewhat stronger among males than females. However, further research is needed to fully understand the nature and extent of this moderating effect.

DISCUSSION

The present study targets a less explored field of research in India, specifically examining the relationship between health-promoting lifestyle and quality of life among late adolescents. Despite existing studies on health-promoting lifestyle and quality of life, there remains a need for longitudinal studies, a holistic approach, and health intervention programs in the future. The results of the current study indicate a positive relationship between health-promoting lifestyle and quality of life. This finding is consistent with previous studies that have demonstrated a positive correlation between health-promoting lifestyle and quality of life (Amirabadizadeh & Sharifzadeh, 2016; Jeoung, 2022; Tol et al., 2013; Wang et al., 2023).

The positive relationship observed suggests that adolescents who engage in health-promoting behaviors tend to report higher quality of life. These behaviors include regular physical activity, balanced nutrition, adequate sleep, stress management, and avoidance of harmful substances. The findings align with previous research that underscores the importance of these behaviors in enhancing overall well-being and life satisfaction.

CONCLUSION

The study found a statistically significant positive correlation between Health Promoting Lifestyle (HPL) and Quality of Life (QOL) among late adolescents, with a little stronger association observed in males than females. These findings highlight the importance of health-promoting behaviors in enhancing quality of life.

Limitation of the Study

This study has several limitations. Firstly, the sample size was relatively small, which may limit the generalizability of the findings. Secondly, the cross-sectional design of the study prevents any causal inferences between Health Promoting Lifestyle (HPL) and Quality of Life (QOL). Finally, other moderating variables, such as socioeconomic status, cultural factors, and individual health conditions, were not accounted for, which could influence the relationship between HPL and QOL. Future research should consider these factors to provide a more comprehensive understanding of the dynamics between health-promoting behaviors and quality of life.

Relationship Between Health Promoting Lifestyle and Quality of Life among Late Adolescence: A Correlational Study

Further Implication

Future research should include qualitative studies to gain a deeper understanding of individuals' experiences and the factors influencing the relationship between Health Promoting Lifestyle (HPL) and Quality of Life (QOL). Health programs need to be tailored to individual needs, including stress management and physical activity, and incorporated into university curricula to emphasize interpersonal relationships, health responsibility, and spiritual development. A holistic approach is essential, focusing on physical, spiritual, emotional, and social well-being, with techniques to reduce stress. Longitudinal studies are necessary to track changes over time, and personalized health plans should be developed for more effective promotion of healthy behaviors and improvement of quality of life.

REFERENCES

- World Health Organization: WHO. (2019, November 26). Adolescent health. <https://www.who.int/health-topics/adolescent-health>.
- Raj, S., Senjam, S.S., & Singh, A. (2013). Assessment of Health-Promoting Behavior and Lifestyle of Adolescents of a North Indian City. *International Journal of Preventive Medicine*, 4, 1189 - 1193.
- Kerr J. *Community health promotion: Challenges for practice*. 1st ed. New York (NY): Baillière Tindall; 2000.
- Rezaeipandari, H., Morowatisharifabad, M. A., Niknahad, S., & Rahmanipour, F. (2015). Relationship between Lifestyle and Quality of Life in Older Adults Yazd City, Iran. *DOAJ (doajdirectoryofopenaccessjournals)*. <https://doaj.org/article/831cd70aded54a38b6de88046934d4de>
- Teoli D, Bhardwaj A. Quality of Life. [Updated 2023 Mar 27]. In: statpearls [Internet]. Treasure Island (FL): statpearls Publishing; 2024 Jan-. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK536962>
- Walker, S.N., Sechrist, K.R. and Pender, N.J. (1987) The Health-Promoting Lifestyle Profile: Development and Psychometric Characteristics. *Nursing Research*, 36, 76-81. [Http://dx.doi.org/10.1097/00006199-198703000-00002](http://dx.doi.org/10.1097/00006199-198703000-00002)
- Samiei Siboni, F., Alimoradi, Z., & Atashi, V. (2018). Health-Promoting Lifestyle: A Considerable Contributing Factor to Quality of Life in Patients with Hypertension. *American journal of lifestyle medicine*, 15(2), 191–199. <https://doi.org/10.1177/155982761880385>
- Jeoung B. (2022). Quality of life and health-promoting lifestyles for parents of children with intellectual and developmental disabilities. *Journal of exercise rehabilitation*, 18(6), 361–368. <https://doi.org/10.12965/jer.2244450.225>
- Tol, azar, tavassoli, elaheh, shariferad, gholam reza, & shojaezadeh, davood. (2011). The relation between health-promoting lifestyle and quality of life in undergraduate students at school of health, isfahan university of medical sciences. *Health system research*, 7(4), 0-0. Sid. <https://sid.ir/paper/592934/en>
- Tol, A., Tavassoli, E., Shariferad, G. R., & Shojaeezadeh, D. (2013). Health-promoting lifestyle and quality of life among undergraduate students at school of health, Isfahan university of Medical sciences. *Journal of education and health promotion*, 2, 11. <https://doi.org/10.4103/2277-9531.108006>
- Mak, Y. W., Kao, A. H. F., Tam, L. W. Y., Tse, V. W. C., Tse, D. T. H., & Leung, D. Y. P. (2018). Health-promoting lifestyle and quality of life among Chinese nursing students. *Primary health care research & development*, 19(6), 629–636. <https://doi.org/10.1017/S1463423618000208>

Relationship Between Health Promoting Lifestyle and Quality of Life among Late Adolescence: A Correlational Study

- Senol, Vesile & Ünalın, Demet & Soyuer, Ferhan & Argün, Mahmut. (2014). The Relationship between Health Promoting Behaviors and Quality of Life in Nursing Home Residents in Kayseri. *Journal of Geriatrics*. 2014. 1-8. 10.1155/2014/839685.
- Amirabadizadeh Z, Sharifzadeh G, Moodi M. Middle-Aged Women's Quality of Life and healthpromotinglifestyle.modcare2016;13(3):e11597.https://doi.org/10.5812/modern c. 11597
- Wang, KY., Chien, CM., Lee, HF. *Et al.* The mediation of health-promoting lifestyle on self-perceived health status and quality of life among nurses: a cross-sectional study. *BMC Nurs* 22, 447 (2023). <https://doi.org/10.1186/s12912-023-01608-y>
- Wang, Kuei-Ying & Chien, Ching-Ming & Lee, Huan-Fang & Yobelina, Yohana. (2023). The mediation of health-promoting lifestyle on self-perceived health status and quality of life among nurses: a cross-sectional study. *BMC Nursing*. 22. 10.1186/s12912-023-01608-
- Jafari Varjoshani, N., Avazeh, A., Alizadeh, S., & Kamali, K. (2018). A comparative study of health-promoting lifestyle and quality of life among nurses and high school teachers in Zanjan, Iran. *Preventive Care in Nursing and Midwifery Journal*, 10(3), 1-10.
- Alaeenejad, Amine & Farahaninia, Marhamat & Janmohammadi, Sara & Haghani, Hamid. (2017). Relationship Between Health-Promoting Behaviors and Quality of Life in Postmenopausal Women. *Journal of Client-centered Nursing Care*. 3. 269-276. 10.32598/jccnc.3.4.269.
- Rakhshani, T., Shojaiezadeh, D., Lankarani, K. B., Rakhshani, F., Kaveh, M. H., & Zare, N. (2014). The association of health-promoting lifestyle with quality of life among the Iranian elderly. *Iranian RedCrescent medical journal*, 16(9), e18404. <https://doi.org/10.5812/ircmj.18404>

Acknowledgment

The author(s) appreciates all those who participated in the study and helped to facilitate the research process.

Conflict of Interest

The author(s) declared no conflict of interest.

How to cite this article: Bhattacharya, P., Gupta, A. & Bandyopadhyay, M. (2024). Relationship Between Health Promoting Lifestyle and Quality of Life among Late Adolescence: A Correlational Study. *International Journal of Indian Psychology*, 12(3), 265-272. DIP:18.01.025.20241203, DOI:10.25215/1203.025