

The Study on Knowledge, Attitude and Consumption Behavior about Healthy Food of High School Teachers in Nontaburi Province

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Abstract

The objectives of this research were 1) to study the knowledge about healthy food; 2) to study the attitude towards consumption of healthy food; 3) to study the relationship between the individual of personal factor and health factor, and 4) to study relationship between knowledge and attitude towards of healthy food of high school teacher in Nonthaburi that influenced their behaviors. Questionnaires were used as a tool for collecting the data, and the data was analyzed by using percentage, mean, standard deviation, t-test, f-test, and Pearson correlation (r).

Most of the responders of this research were female. Age group was between 51-60 years old. Height group was between 151-160 centimeters. Weight group was between 51-60 kilograms. The majority of their salaries were between 28,001-33,000 Baht. The level of personnel sickness was low. The level of understanding of how to consume healthy food was high. The attitude of consuming healthy food was high level. But the behavior of consuming healthy food was mostly at moderate level.

According to the study of relationship between the individual of personal factor and health care factor, the results were: there was relationship between sex and behavior of consuming healthy food, statistically significant at the .05 level. Moreover, the study of relationship between the knowledge and attitude of consuming healthy food of high school teacher showed that it had an impact on their behavior which was statically significant at the .05 level.

Keyword: knowledge, attitude, behavior of healthy food, high school

Introduction

According to the objective of development in human life under regulation plan number 10 of economy and society improvement 2007 – 2011, it considered that Thai population would be developed in their physical conditions, minds, knowledge and capacities, working skills, and securities. This would cover in every group target. Increasing potential, their families, communities, and societies would be strength. Moreover, the level of sickness such as heart attracts, hypertension, diabetes, brain, and cancer would be decreasing. In term of success, the number of labor available would increase, and the cost of medical care would decrease by following.

According of observation of Ministry of Public Health, Doctor Narong Aengkasuvapala (2008) presented 2 over 3 of Thai population with 40 -59 years old; they were impacted with fat in blood vessel, gain weight, and fatness. These would be the result from too much eating, strain, and less exercise. These would cover over people in working group that always had three and more additional meals. Therefore, having more meals in every single day without any exercise would be affected to be risky to have those sickness on the top.

Long time ago, vegetable and herb became the majorities in Thai food component for Thai people. To have brown rice with Thai dishes, protein, carbohydrate, vitamin, and fat would be nutrients that the eaters would receive after their meals. But in this century, many people have no time to make their own meals, and they still ignore to have some health food or study the health education for their healthy.

According to this study, it considered to the knowledge, attitude, and behavior of food consuming for health. Because having right of knowledge and directional attitude would bring to the right direction of behavior in food consuming; therefore, this research would be an implement for improving healthy for Thai people in the future.

The objectives of this research were ; 1) to study the knowledge about healthy food;2) to study the attitude towards consumption of healthy food;3) to study the relationship between the individual of personal factor and health factor, and 4) to study relationship between knowledge and attitude towards of healthy food of high school teacher at Nonthaburi that impacted their behaviors.

Hypothesis:

1. There are different patterns of the respondent to consume food for healthy if they are different genders.

2. There is a relationship between the pattern of the respondents to consume food for healthy and age
3. There are different patterns of the respondent to consume food for healthy if they have different marriage background.
4. Different educational backgrounds would have different patterns of having meals for healthy.
5. There are different patterns of the respondent to consume food for healthy if they have different salaries.
6. There are different patterns of the respondent to consume food for healthy if they have different personal sickness.
7. There is a relationship between the pattern of the respondents to consume food for healthy and understanding of healthy food.
8. There is a relationship between the pattern of respondents to consume food for healthy and attitude of healthy food consuming.

Process:

To study this research, survey became a process for collecting the data about the attitude and behavior of food consuming of high school teachers at Nonthaburi.

Sampling:

Samplings were 340 high school teachers at Nonthaburi province

Data Collection:

The instruments for studying this research was the set of questionnaire, and it would be divided by 4 parts:

Part 1: The question would focus on personal and the respondents' sanitations. Those questions were gender, age, marriageable background, education background, salary, and congenital diseases. Open-ended and check list were types of question on the questionnaire.

Part 2: The question would focus on understanding how to have food for health. The multiple choices became the type of the question on questionnaire.

Part 3: Attitude of consuming food for health would be measurement. In term of this part, likert scale type or asking agreement would be a question on questionnaire.

Part 4: The frequency of food consuming for healthy would be the data for collecting. The question would focus on how often the respondents would have food that concerns for health. Rating scale

would be type of question on this questionnaire.

Data Collecting:

The using data would be collected by the researcher, all of the data would be asked for the respondents to be corporate. One high school teacher would be asked per one school. The researcher would take one month for collecting data by starting on March 2 – March 31, 2009

Data Analysis:

After, finish collecting the data, coding and analysis the data by using computer would be the next process for getting information. The researcher called the statistic analysis. In term of amount, percentage, mean, standard deviation, T-test, F-test, and Pearson Correlation would be the statistic answer for analysis.

Result

Personal data:

The majority of the respondents were female. The age group of the respondent was between 51 – 60 years old. Height group was between 151 – 160 centimeters. And the weight group was between 51 – 60 kilograms. The most respondents were marriages, and their education degrees were bachelor's degrees. The salary group was between 28,001 – 33,000 Baht. The level of personal sickness is low.

Health food:

Grouping the respondents about how they concerned about health food could be divided into three groups. The most respondents had knowledge about health food very well were in the first group, and the score was between 12 – 15 points. Second group of the respondents who knew about health food, but not very well, and the score was between 8 – 11 points. And the last group of the respondent who did not know well about the health food and the score was between 0 – 7 points.

The attitude:

The respondents had good attitudes about how they consumed health food. The first result presented that the respondents believed to receive 5 main nutrients and workout would make them healthy. The second belief was consuming fruit and vegetable helped for good excretory system and cancer stopping. Moreover, having brown rice, the respondent would have more benefit than having white rice. Finally, medias were unable to influence on the respondents' decisions to choose or consume food.

Consuming food for health:

The level of the behavior of respondents to have food for healthy was meddles. The result presented not to drink alcohol in the highest average level. The second was not to have salted food and drinking water 6 – 8 glasses per day was a good idea. Having soybean milk or milk was a lowest average level.

The result of hypothesis:

Hypothesis 1: There are different patterns of the respondents to consume food for healthy within different gender. The result is gender has a relationship with the pattern of the respondents to consume food for healthy.

Hypothesis 2: There is a relationship between age and pattern of the respondents to consume food for healthy. The result is rejection; there is no relationship between age and pattern of the respondents to consumer food for healthy.

Hypothesis 3: There are different patterns of respondents to consume food for healthy within different marriage backgrounds. The result is rejection; there is no relationship between the pattern of respondents to consume food for healthy and marriage background.

Hypothesis 4: There are different patterns of respondents to consume food for healthy within different education backgrounds. The result is rejection; there is no relationship between the pattern of respondents to consume food for healthy and education background.

Hypothesis 5: There are different patterns of respondents to consume food for healthy within different salary earning. The result is rejection; there is no relationship between the pattern of respondents to consume food for healthy and salary earning.

Hypothesis 6: There are different patterns of respondents to consume food for healthy within different congenital diseases. The result is rejection; there is no relationship between the pattern of respondents to consume food for healthy and personal sickness.

Hypothesis 7: There are different patterns of respondents to consume food for healthy within different the understanding of how to have the healthy food. The result is acceptable; there is relationship between the pattern of respondents to consume food for healthy and the understanding of how to have healthy food.

Hypothesis 8: There are different patterns of respondents to consume food for healthy within different attitude of consuming food for healthy. The result is acceptable; there is a relationship for between the pattern of respondents to consume food for healthy and the attitude of consuming food healthy.

Suggestion

According to study this research, attitude and behavior of food consuming for healthy for high school teachers at Nonthaburi, the researcher has few suggestions by:

Suggestion for practicing

1. In term of result, the majority of the respondents were female. They had knowledge background and attitude about consuming food for healthy very good; on the other hands, their patterns of consuming food for healthy was on middle. Therefore, they did not concern much in choosing some food for their health. The most respondents believed in wrong direction that they did not need milk, but having coffee or tea instead. They should be educated by suggesting milk was giving more benefit in every gender and age, and they could have it everyday. In addition, educating them knew how to have food in the right way and food would be another suggestion form researcher.

2. The respondents should concern about food consuming because it would be easy to teach their students when they practiced good in having food. That meant they would be good example for their students. The respondents would encourage their students by educating them understood in food consuming for healthy, and their students would earn benefit in future.

3 .The research should be presented to the department that might concern. The objective was to educate the public how to consume food for healthy. That meant food consuming was very important. This would influence someone who was not interested had a second thought to concern about his or her healthy.

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