

CRITERIA FOR ASSESSING THE LEVEL OF ADHERENCE TO A HEALTHY LIFESTYLE BY MEDICAL WORKERS

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Abstract

This article, which consists of a literature review, analyzes the results of studies presented in scientific articles and literature published over the past five years aimed at improving the occupational health of healthcare workers, and draws conclusions. The article examines factors related to emotional fatigue, stress, and the health of healthcare workers. To determine the level of healthy lifestyles among the population and morbidity rates, behavioral assessment criteria were studied. The level of adherence to healthy lifestyles among healthcare workers employed in healthcare institutions was studied, and a healthy lifestyle campaign was conducted among them. Maintaining a healthy lifestyle is important for physical and mental health and ensuring work efficiency, but the high workload of healthcare workers, night shifts, poor nutrition, and lack of physical activity have led to serious health problems. A number of studies conducted by scientists have proven that an unhealthy lifestyle leads to excess weight, emotional stress, and a reduced quality of life. The above data indicate the need to create conditions for regular adherence to the rules of a healthy lifestyle in the workplace in order to maintain the health and improve the efficiency of healthcare workers.

Keywords: Preventive medicine, healthy eating, healthy lifestyle, professional stress, obesity, excess weight, burn out.

Introduction

TIBBIYOT XODIMLARINING SOG‘LOM TURMUSH TARZIGA RIOYA ETISH DARAJASINI BAHOLASH MEZONLARI

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Annotatsiya

Adabiyotlar sharhidan tashkil topgan ushbu maqolada sog‘liqni saqlash xodimlarining kasbiy salomatligini yaxshilashga qaratilgan so‘nggi 5 yilda chop etilgan ilmiy maqolalar va adabiyotlarda



keltirilgan tadqiqotlar natijalari tahlil qilinib, xulosalar berilgan. Maqolada tibbiyot xodimlarining kasbiga oid emotsional charchash, zo'riqish va salomatlik o'rtasidagi bog'liq omillar yoritilgan. Aholining sog'lom turmush darajasini va kasalliklarga chalinish ko'rsatkichlarini aniqlash uchun xulq atvorni baholash mezonlari o'rganilgan. Sog'liqni saqlash muassasalarida faoliyat olib borayotgan tibbiyot xodimlarining sog'lom turmush tarziga rioya etish darajasi o'rganilgan hamda ular orasida sog'lom turmush tarzi targ'iboti olib borilgan. Sog'lom turmush tarzini yuritish jismoniy va ruhiy salomatlikni saqlashda hamda ish samaradorligini ta'minlashda muhim hisoblanadi, biroq, tibbiyot xodimlarining yuqori ish yuklamasi, tungi navbatchilik, noto'g'ri ovqatlanish va jismoniy faollikning yetishmasligi ularning salomatligida jiddiy muammolarga olib kelgan. Olimlar tomonidan olib borilgan qator tadqiqotlarda nosog'lom turmush tarzi yuritish ortiqcha vazn, emotsional zoriqish va hayot sifatining pasayishishiga olib kelishi isbotlangan. Yuqoridagi ma'lumotlar, tibbiyot xodimlarining salomatligini saqlash va ish samaradorligini oshirish maqsadida ish joyining o'zida sog'lom turmush tarzi qoidalariga muntazam rioya etish uchun sharoitlar yaratish zarurligini ko'rsatadi.

Kalit so'zlar: preventiv tibbiyot, sog'lom ovqatlanish, sog'lom turmush tarzi, kasbiy zo'riqish, semizlik, ortiqcha vazn, ruhiy zo'riqish.

КРИТЕРИИ ОЦЕНКИ УРОВНЯ СОБЛЮДЕНИЯ ЗДОРОВОГО ОБРАЗА ЖИЗНИ МЕДИЦИНСКИМИ РАБОТНИКАМИ

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Аннотация.

В данной статье, состоящей из обзора литературы, проанализированы результаты исследований, представленных в научных статьях и литературе, опубликованных за последние 5 лет, направленных на улучшение профессионального здоровья работников здравоохранения, и сделаны выводы. В статье рассматриваются факторы, связанные с эмоциональной усталостью, стрессом и здоровьем медицинских работников. Для определения уровня здорового образа жизни населения и показателей заболеваемости изучались критерии оценки поведения. Изучен уровень соблюдения здорового образа жизни медицинскими работниками, работающими в учреждениях здравоохранения, и среди них проведена пропаганда здорового образа жизни. Поддержание здорового образа жизни важно для поддержания физического и психического здоровья и обеспечения эффективности работы, однако высокая рабочая нагрузка медицинских работников, ночное дежурство, неправильное питание и недостаток физической активности привели к серьезным проблемам со их здоровьем. В ряде исследований, проведенных учеными, доказано, что нездоровый образ жизни приводит к избыточному весу, эмоциональному напряжению и снижению качества жизни. Вышеуказанные данные свидетельствуют о необходимости создания условий для регулярного соблюдения правил здорового образа жизни на рабочем месте с целью сохранения здоровья и повышения эффективности труда медицинских работников.



Ключевые слова: профилактическая медицина, здоровое питание, здоровый образ жизни, профессиональное напряжение, ожирение, избыточный вес, эмоциональное выгорание.

Relevance of the problem

Healthcare workers are the backbone of the health system and have the right to safe working conditions. The strategy for action for 2021–2030, adopted by the 74th World Health Assembly, states that medical personnel must be provided with safe and healthy working conditions in their workplaces, and their safety is identified as a priority for patient safety. The World Health Organization (WHO) and the International Labour Organization (ILO) are developing and supporting the implementation of occupational health and safety programs for healthcare workers in different countries. According to WHO estimates, if strategic plans focused on healthy lifestyles and disease prevention are effectively implemented, up to 39 million deaths could be prevented by 2030, and healthcare workers play a major role in achieving this goal.

Literature review. Supporting and motivating healthcare workers employed in healthcare institutions is an important yet complex issue that must be addressed, especially considering their high workload, diversity of professional duties, and long working hours. A number of studies conducted by researchers have examined multi-component programs and focused on differences in responses and their effectiveness. A multidisciplinary retrospective cohort study was carried out in five healthcare institutions with the direct participation of medical personnel. During the study, alongside questionnaire-based surveys, healthcare workers received easy-to-perform 90-minute physical exercise sessions, 15-minute counseling sessions on healthy nutrition, and guidance on behavior modification. The intervention lasted for 20 weeks. Anthropometric measurements, body composition, and physical fitness indicators taken before and after the survey were compared using standardized tests. Differences in responses according to sex, age, weight status, and shift work among healthcare workers were summarized and analyzed using estimation equations.

Analysis of the obtained results showed that, due to the interventions aimed at improving the lifestyles of the 302 healthcare workers who participated in the survey, almost all participants demonstrated significant improvement in anthropometric indicators, including body mass index, waist circumference, waist-to-hip ratio, and waist-to-height ratio, as well as body composition parameters such as body fat percentage, muscle mass, and visceral fat area, and physical fitness indicators including grip strength, vertical jump, sit-up performance, squat performance, and step test results, with all improvements being statistically significant ($p < 0.05$).

In addition, although a greater average reduction in body mass index was observed among physicians who regularly worked night shifts compared with employees who did not work shifts (adjusted $r = 0.045$), no significant differences were found across sex, age, or weight groups [2]. In conclusion, the results of the study conducted within a multidisciplinary program aimed at changing the lifestyle of healthcare workers showed that, regardless of sex, age, and weight status, it led to improvement in their anthropometric indicators [2].

To ensure continuity of medical care, healthcare workers are required to work 24 hours a day. As a result, one in every five healthcare workers is on night duty. Research findings have shown that shift work, especially night work, has a negative effect on health. This is mainly attributed to disruption of circadian rhythms and insufficient sleep. Working at night contributes to the development of



unhealthy behavioral patterns and may lead to digestive problems, fatigue, sleep disturbances, a higher risk of respiratory infections, chronic tiredness, and stress. These problems, in turn, are among the major causes of the development of noncommunicable diseases [3].

The importance of a healthy lifestyle is increasing worldwide because it forms the foundation for the prevention and treatment of many diseases. Therefore, adherence to a healthy lifestyle is of crucial importance in preventing and managing noncommunicable diseases. Healthcare workers play a central role in providing patients and the general population with information about lifestyle. In Al-Ahsa Province of the United Arab Emirates, the prevalence of lifestyle factors among primary healthcare physicians was studied, including smoking, body mass index, dietary habits, physical activity, and caffeine consumption. A total of 230 primary healthcare physicians were selected using cluster sampling, and the data were analyzed using the chi-square test. It was found that 71.2% of primary healthcare physicians had multiple unhealthy lifestyle factors. The most common factor was low physical activity, observed in 73% of physicians, followed by poor diet in 52%, obesity in 51.51%, smoking in 15.88%, and caffeine consumption in 9%. This study provided valuable information on the lifestyle factors of primary healthcare physicians in Al-Ahsa Province. The findings highlighted the importance of promoting a healthy lifestyle among healthcare workers, since their behavior may increase the effectiveness of counseling provided to patients and thus positively influence population health. Addressing these lifestyle factors through early inclusion in medical education programs and workplace wellness initiatives may improve physicians' well-being and enhance their ability to serve as role models for healthy behavior. The study makes a positive contribution to the literature on lifestyle and noncommunicable diseases and offers recommendations to health authorities for improving the health and working conditions of primary healthcare physicians [1].

The behavior of Pakistani healthcare workers was studied using the Health-Promoting Lifestyle Profile II questionnaire. The study examined the influence of physicians' adherence to a healthy lifestyle on their health promotion activities within medical institutions. The questionnaire included sociodemographic data and questions on dietary habits, psychological stability, health responsibility, interpersonal relationships, physical exercise, and stress management. The results revealed important features related to physicians' health-promoting behaviors. Interpersonal relationships were positive in 72.2% of physicians. Among physicians, only 0.2% demonstrated an excellent level of healthy eating, 11% had a good level, while the remaining participants were found to have unsatisfactory dietary habits. The indicator for physical activity was very low: only 1% of healthcare workers had an excellent level, while 20% were at a moderate level. These results emphasize the need to focus on physicians' well-being and to develop and implement policies aimed at strengthening their efforts to promote a healthy lifestyle [4].

The association between spiritual health and occupational burnout among healthcare workers was proposed as a hypothesis, and out of 1,049 articles, 40 were systematically analyzed by researchers from the United Kingdom. This review was comprehensive and innovative, covering a wide range of aspects related to spiritual health. All selected studies provided assessments of occupational burnout and spiritual health, or closely related concepts, although there was considerable diversity in the measurement tools used. According to the analysis, 17 studies demonstrated a weak association between spiritual health and occupational burnout. Another 17 studies found a strong association.



Even among the 8 studies rated as high quality, the evidence was not consistent. The findings indicate that increasing attention is being given to the association between physician burnout and spiritual health. Studying this relationship is important for developing and evaluating effective strategies to prevent occupational burnout among physicians [6].

Nurses constitute the largest workforce among all healthcare professionals (World Health Organization, 2022). According to the World Health Organization (WHO), the global nursing workforce consists of approximately 27 million people and accounts for more than 50% of all healthcare workers. Nurses play a central and essential role in patient care, and their activities are aimed at promoting health and preventing disease among patients and the wider community. Worldwide, the rates of overweight and obesity among nurses and midwives are higher than in the general population, which is associated with the influence of the workplace environment on dietary habits (WHO, 2022).

Researchers from the Joanna Briggs Institute (JBI) conducted a systematic review to identify the barriers to and facilitators of healthy eating among nurses working in clinical settings. This systematic review identified the factors influencing healthy eating habits among nurses in the workplace. Personal characteristics, the physical work environment, and organizational shortcomings were identified as the main barriers affecting nurses' dietary habits. Weight gain among nurses was often associated with the consumption of chocolate and other fast, unhealthy foods, as well as the tendency to eat calorie-dense convenience foods after night shifts in order to overcome fatigue, which in turn led to insufficient consumption of fruits and vegetables. According to this systematic review, work-related stress, heavy workload, and shift duty also contribute to emotional eating, that is, disruption of eating habits, and reduce the level of mindful eating, which is measured through the ability to control eating behavior, eat attentively, and maintain discipline. The conclusions of this systematic review indicate the necessity of providing factors and conditions that promote healthy eating among nurses in the workplace, organizing healthy nutrition at work, and encouraging it at social levels, while emphasizing that this is achievable [5].

In Poland, the difficulties faced by 161 general practitioners in providing advice on the promotion of a healthy lifestyle were examined. The aim of this study was to determine the influence of personal factors of general practitioners, including body mass index (BMI), on their counseling of patients regarding weight management and healthy lifestyle promotion. The collected data included demographic characteristics, chronic diseases, physical activity, dietary habits, BMI, and counseling practices. The relationship between physicians' personal characteristics and the likelihood of giving healthy lifestyle advice was analyzed. The study results showed that 30.4% of physicians were overweight and 11.8% were obese, which affected their obesity treatment and counseling practices. Only 3.7% of physicians consistently provided advice on diet and physical activity, while 57.7% assessed patients' lifestyle. A total of 77.6% of physicians measured patients' BMI, and this increased the likelihood of counseling. In addition, 63.4% of physicians reported seeing more than 100 patients per week, while 73.3% identified lack of time as the main problem. According to the researchers' recommendations, in order to improve obesity treatment, it is especially important to expand practical guidelines, actively involve the community, and ensure comprehensive training among healthcare workers, because physicians are considered "role models" and should set a positive example for patients. For example, a physician with a normal BMI may appear more credible to a patient than an



overweight or obese physician, which may increase the effectiveness of counseling on weight reduction. Physicians should therefore receive proper training so that the volume and frequency of the advice they provide depend not on their personal characteristics, but solely on the patient's health status [7].

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