

# Examining the Health Behaviour of Young People

Ferenczy M<sup>1</sup>, Szabó D<sup>2</sup>, Komlósi K<sup>1</sup>, Rozmann N<sup>3</sup>, Grasselly M<sup>1</sup>, Pergel M<sup>1</sup>, Boncz I<sup>1</sup>,  
Karácsony I<sup>1</sup>

<sup>1</sup> University of Pécs, Szombathely, Hungary <sup>2</sup> Premontrei Rendi Szent Norbert Gymnasium, Szombathely, Hungary

<sup>3</sup> University of Pécs, Pécs, Hungary

## OBJECTIVES

The aim of our study was to assess how sociodemographic characteristics (gender, type of school, place of residence, parental education, family structure) influence risk behaviours (fruit and vegetable consumption, brushing teeth, screen use, physical activity) among young people (18-25 years old).

## METHODS

We conducted a cross-sectional, quantitative, descriptive questionnaire survey. Data collection was carried out using a self-designed demographic questionnaire and questions adapted from the HBSC (Health Behaviour in School-Aged Children) survey (family structure and communication, level of family support, eating habits, oral hygiene, physical activity, screen use, sleeping habits, body image). Surveyed young people aged 18 and over in secondary school or university, using non-random expert sampling (N=172). Exclusion criteria were if the person was over 25 or has filled in the questionnaire incompletely. Descriptive statistical analysis and  $\chi^2$  test were applied using Microsoft Excel 2010 ( $p < 0.05$ ).

## RESULTS

The results showed that girls consume more vegetables and fruit, brush their teeth more often, have lower screen use and more physical activity than boys ( $p < 0.05$ ). Type of school also affected on nutrition and physical activity ( $p < 0.05$ ), the place of residence and parental education influenced diet, physical activity and screen use ( $p < 0.05$ ).

## CONCLUSIONS

The health effects of an active, healthy adolescence have implications for adulthood. It is positively related to self-image, self-esteem and quality of family and peer relationships, and negatively related to subjective health complaints. Our research has also shown that gender, type of school and parental education influenced young people's health behaviour.

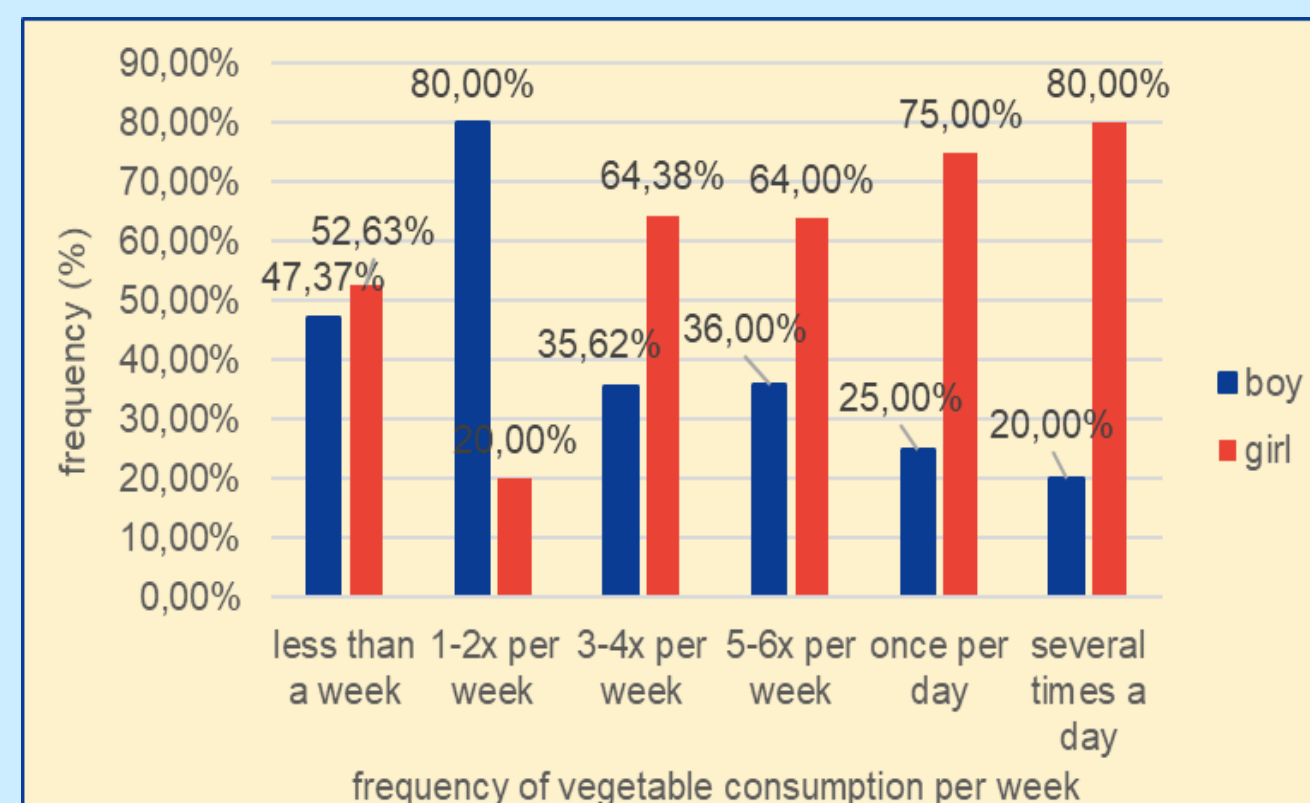


Figure 1. Distribution of vegetable consumption by gender (N=172)

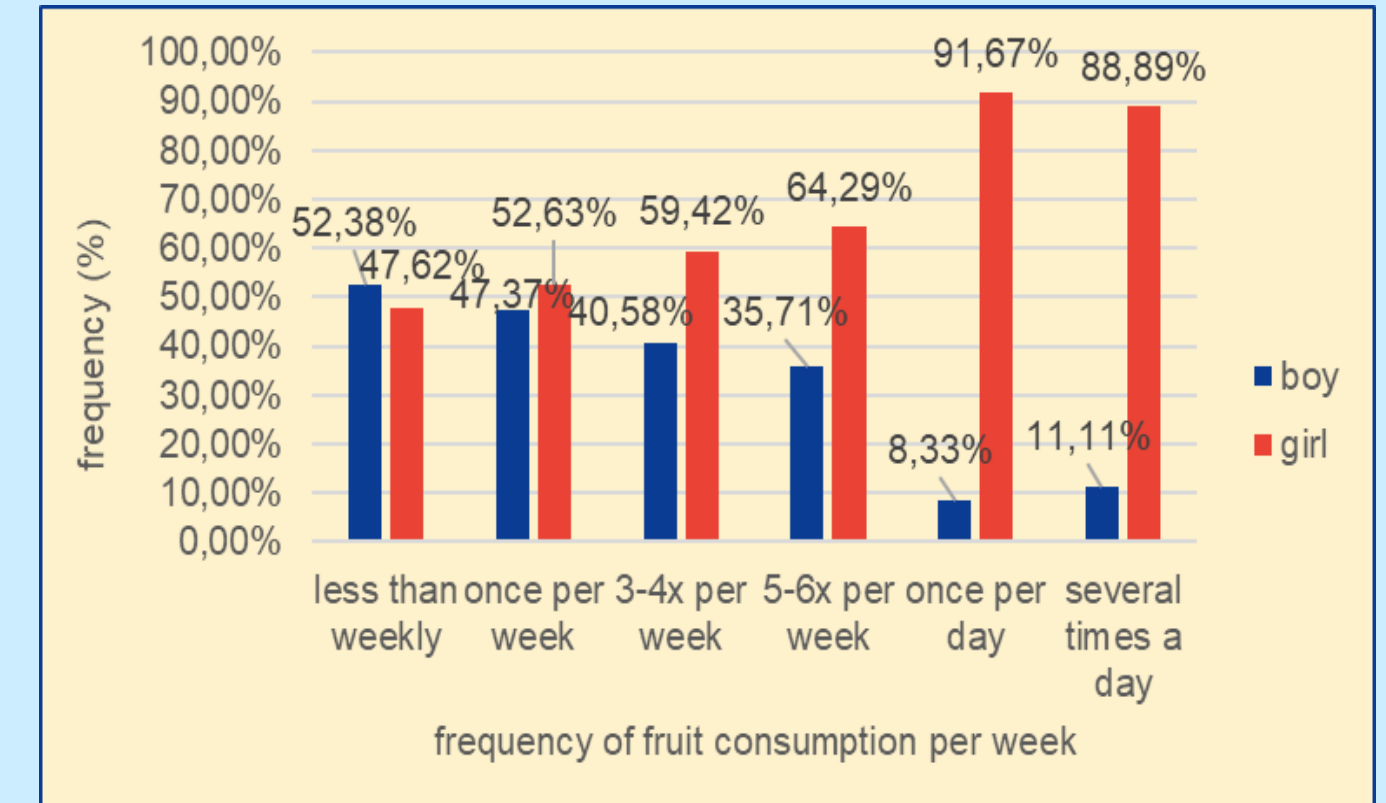


Figure 2. Distribution of fruit consumption by gender (N=172)

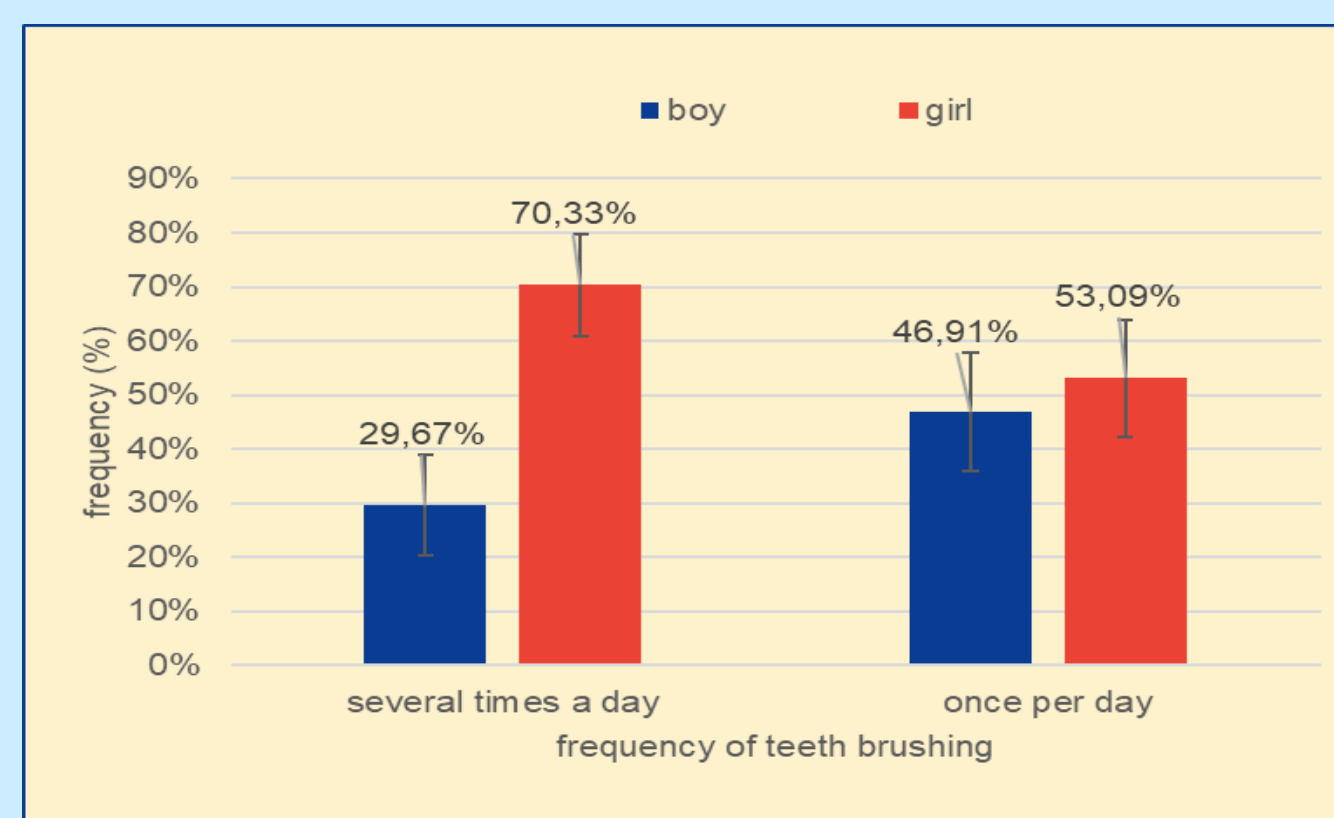


Figure 3. Frequency of teeth brushing by gender (N=172)

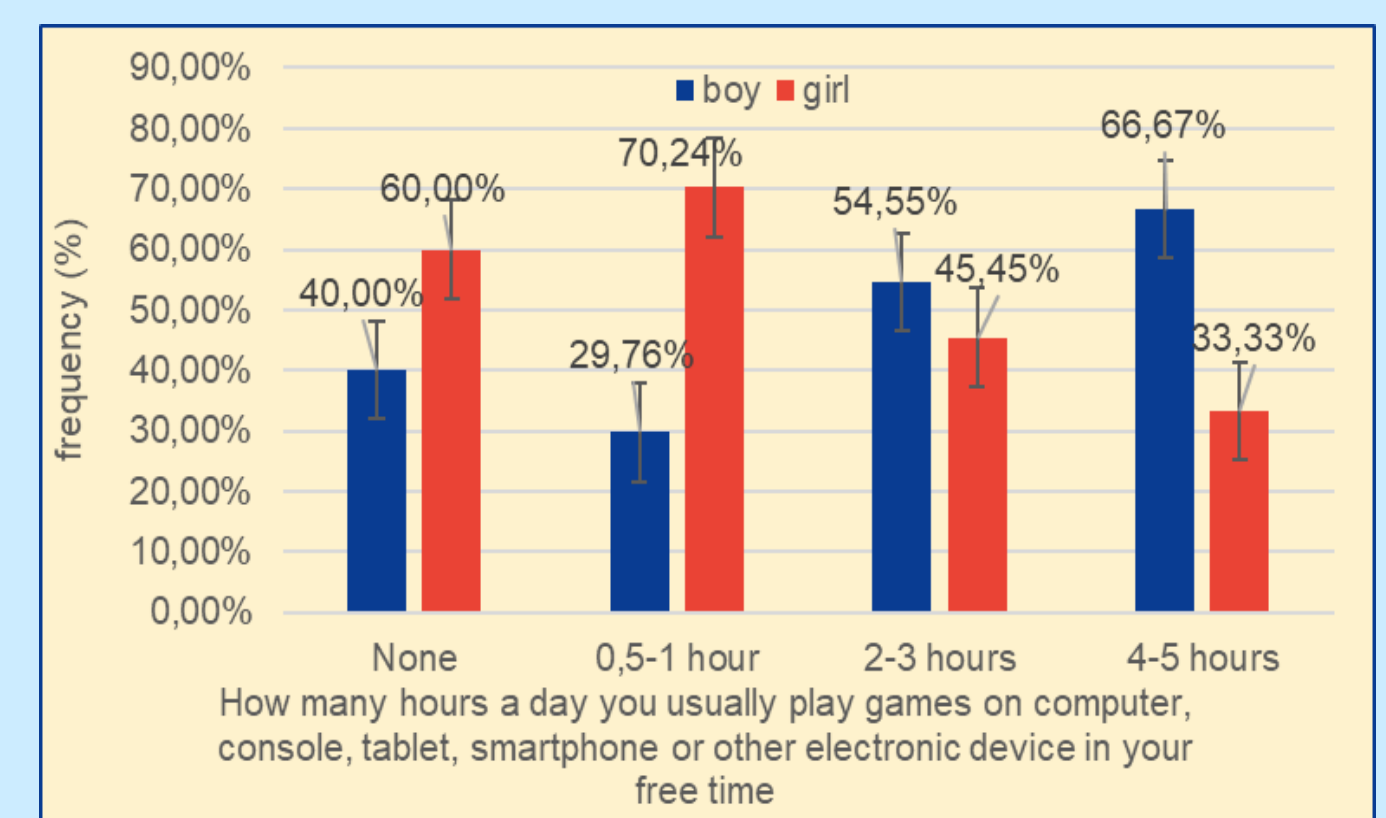


Figure 4. Screen usage by gender (N=172)

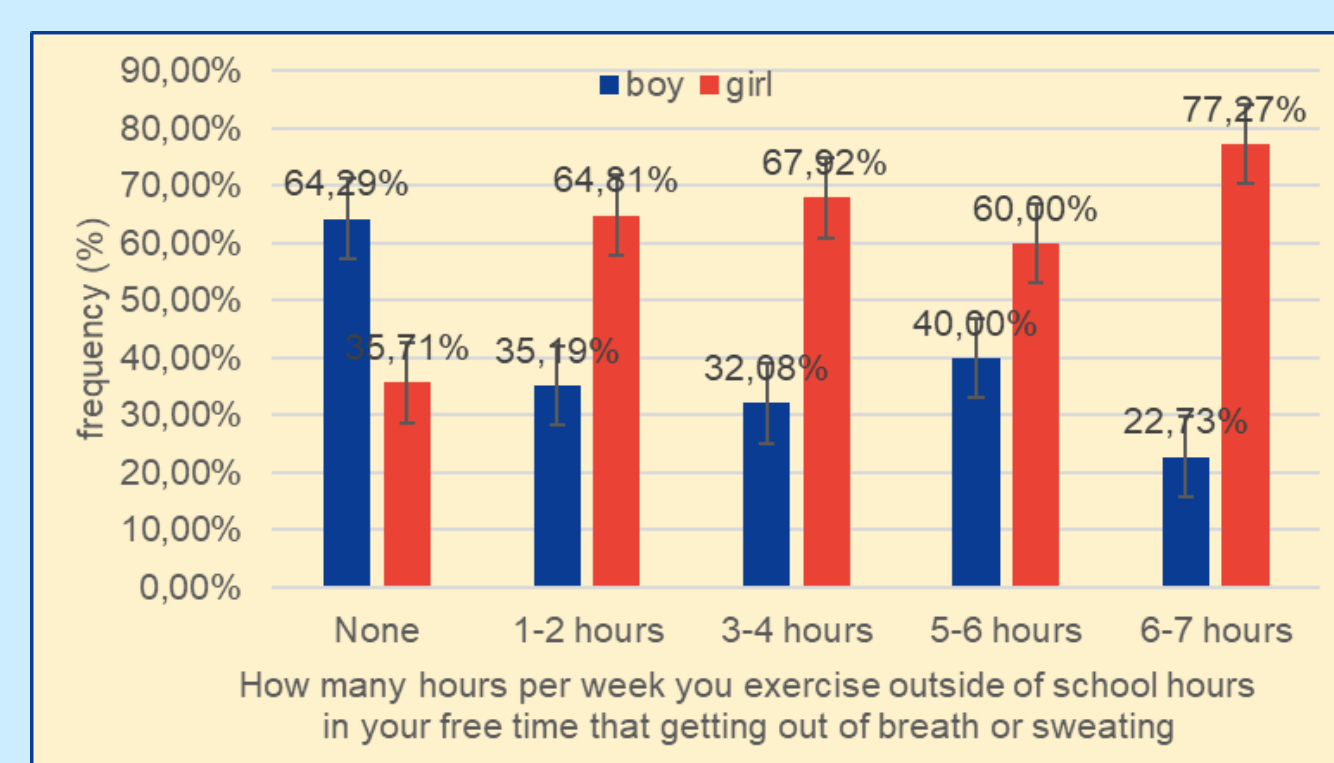


Figure 5. Distribution of physical activity by gender (N=172)

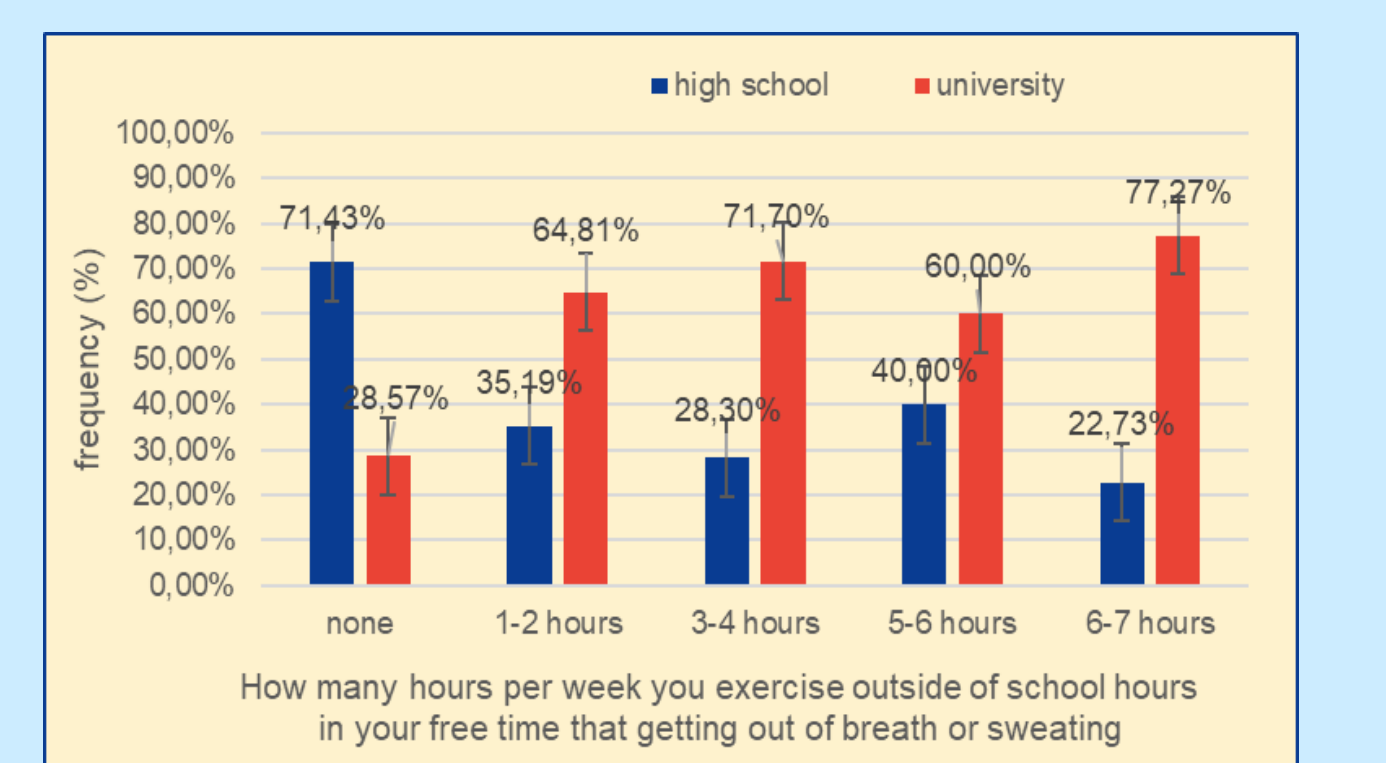


Figure 6. Frequency of physical activity by school type (N=172)

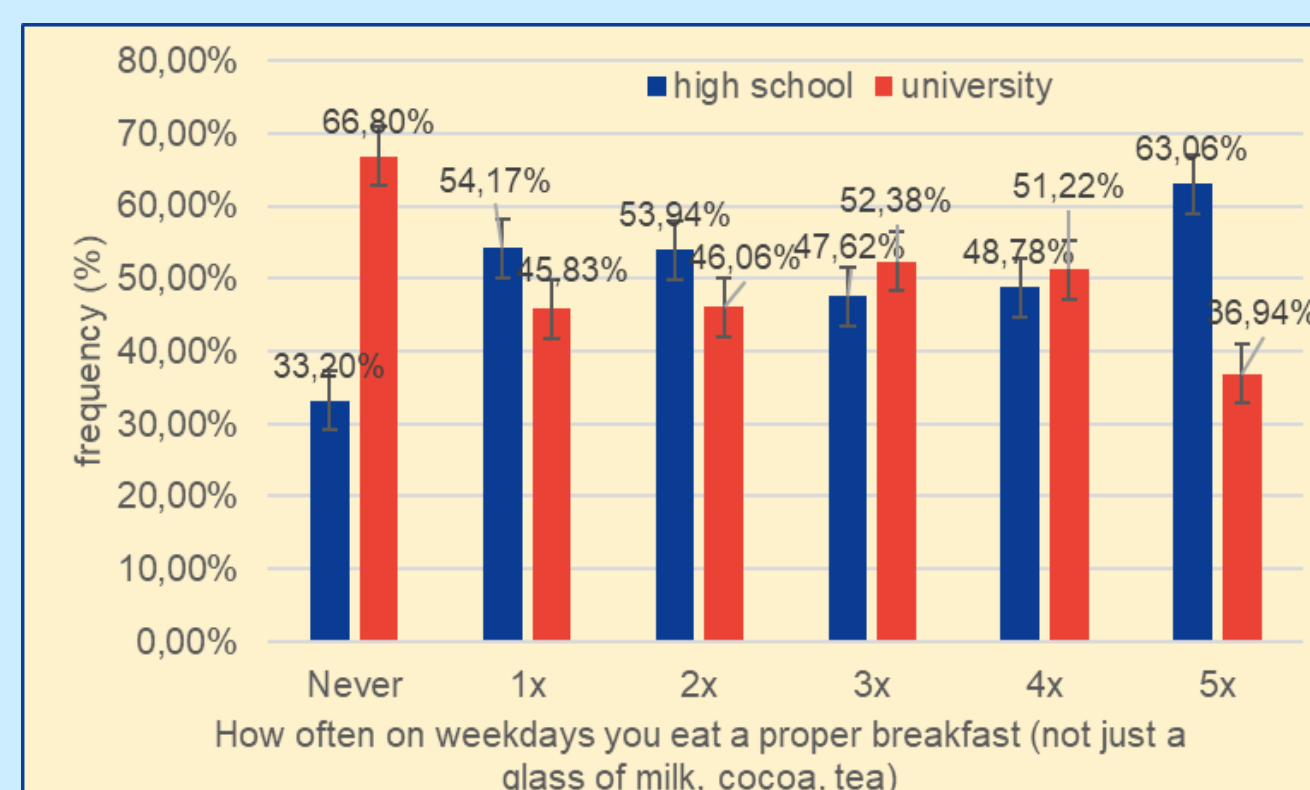


Figure 7. Frequency of breakfast by school type (N=172)

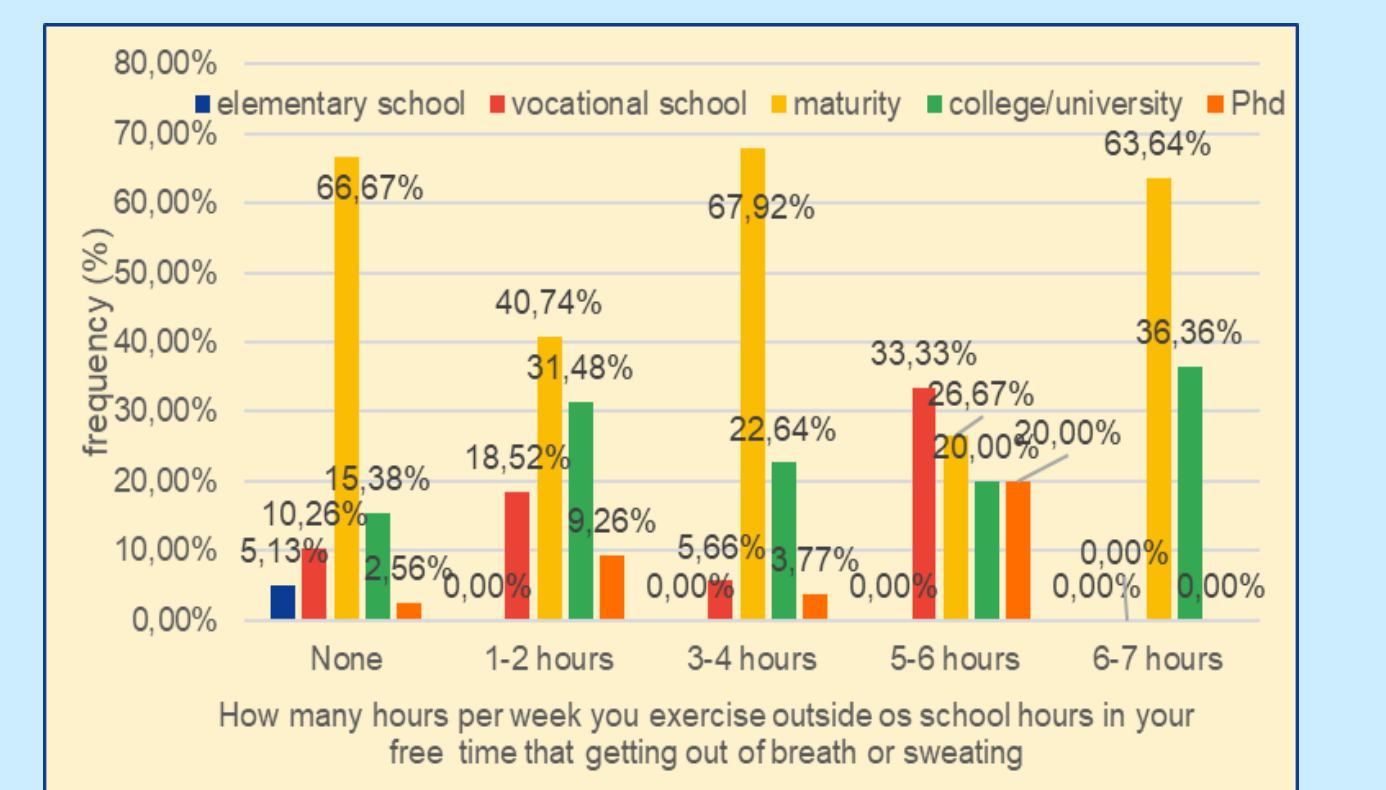


Figure 8. Relationship between mother's education level and physical activity (N=172)

ISPOR Europe 2022  
6-9 November 2022



EPH  
79

### Corresponding author:

Dr. Imre BONCZ, MD, MSc, PhD, Habil  
University of Pécs, Faculty of Health Sciences, Hungary  
Institute for Health Insurance  
E-mail: imre.boncz@etk.pte.hu



HUNGARIAN  
GOVERNMENT

SZÉCHENYI 2020

European Union  
European Social  
Fund



INVESTING IN YOUR FUTURE