

NAZIV DISERTACIJE: MODEL EDUKACIJE ZA ZDRAVLJE I UČINAK NA BIHEJVORALNE DETERMINANTE ZDRAVLJA**Autor:** Suada Branković**Mentor:** Prof. dr Aida Pilav**Datum odbrane:** 28.11.2015. godine**DOI:** <https://doi.org/10.17532/DD.2015.07>**UVOD**

U planiranju prevalencija i kontrole oboljenja, koja praktično traju u kompletnom životnom ciklusu pojedinca, postoji stalna stručna dilema oko toga da li se prikloniti aktivnim (bihevioralnim) ili pasivnim (strukturnim) strategijama. Bihevioralne ili aktivne strategije podstiču pojedince da preuzmu aktivnu ulogu u zaštiti samih sebe i svoga zdravlja, bez obzira na uticaje u okolini.

HIPOTEZE

Postojanje visoke prevalencije bihevioralnih faktora rizika kao prekursora u nastanku zaraznih i nezaraznih hroničnih oboljenja kod ženske studentske populacije. Postojanje razlika u procjeni zdravstvenih rizika i potreba kod ženske populacije. Dokazati djelotvornost edukacije kod promjene znanja navika i stavova vezanih za životni stil.

CILJEVI ISTRAŽIVANJA

Procijeniti učestalost bihevioralnih preventabilnih faktora rizika kao prediktora u nastanku i razvoju zaraznih i nezaraznih oboljenja među ženskom studentskom populacijom u starosti od 18 do 24 godine.

MATERIJAL (ISPITANICI) I METODE ISTRAŽIVANJA

Ispitanici su ženska studentska populacija koja redovno pohađa od prve do završne godine studija na četiri fakulteta Univerziteta u Sarajevu. Učesnici u fokus grupama su lično pozivani i zamoljeni da dobrovoljno učestvuju u radu fokus grupa. Fokus grupu čini 8 do 12 članova, te je očekivani broj učesnika fokus grupa od 32 do 40. Studija je dizajnirana kao retrospektivno-prospektivna observaciona studija, a primjenjena je metoda triangulacije, a to je primjena više vrsta različitih metoda obrade i prikupljanja podataka (kvantitativni i kvalitativni metod istraživanja).

REZULTATI ISTRAŽIVANJA

Rizik nepravilne ishrane se nije statistički značajno smanjio kod studentica zdravstvenog i farmaceutskog fakulteta, ali je došlo do statistički značajnog smanjenja kod studentica Fakulteta političkih nauka ($p=0,016$) i studentica Fakulteta saobraćaja i komunikacija ($p=0,005$). Studentice Fakulteta saobraćaja i komunikacija nakon provedenog istraživanja, povećale su znanje o zdravlju i statistički smanjile rizik po zdravlju ($p<0,05$). Kod studentica Farmaceutskog fakulteta nije se povećao skor procjene sopstvenog zdravlja ($p>0,05$), dok je kod studentica ostala tri fakulteta, obuhvaćenih ovim istraživanjem, došlo do statistički značajnog povećanja skora o sopstvenom znanju ($p<0,05$). Nije ustanovljena statistički značajna promjena riziko skora među fakultetima. Provedena edukacija nije uticala na promjenu stava o korištenju zdravstvene zaštite i poznavanja zdravlja žena. Analizom skora ne izloženosti navikama pušenja, upotrebi alkohola i psihoaktivnih supstanci, samo je kod studentica Fakulteta političkih nauka došlo do smanjenja skora, što je ukazivalo da su ispitanice ovog fakulteta na kraju istraživanja bile izloženije navikama pušenja, upotrebi alkohola i psihoaktivnih supstanci. Znanje seksualnog ponašanja se poboljšalo primjenom edukativnog programa kod studentica koje u planu i programu svog studija ne dobivaju informacije o ovom problemu. Nakon provedenog istraživanja, analiziranih anketnih upitnika i procjene znanja i stavova studentica o zdravlju, došlo se do zaključka da postoji visoka prevalenca bihevioralnih faktora rizika kao prekursora u nastanku zaraznih i nezaraznih hroničnih oboljenja u ženskoj studentskoj populaciji.

ZAKLJUČAK

Došlo se do zaključka, da nakon provedene modularne edukacije, zdravlje, znanje i stav se statistički značajno mijenjaju u smjeru promjena vezanih za zdrav životni stil, čime je potvrđena radna hipoteza ovog istraživanja.

KLJUČNE RIJEČI: Bihevioralne determinante zdravlja, studentska populacija.

DISSERTATION TITLE:**Author:** Suada Branković**Mentor:** Prof. dr Aida Pilav**Date of defence:** 28. November 2015.**DOI:** <https://doi.org/10.17532/DD.2015.07>**INTRODUCTION**

In planning for prevention and control of diseases, which practically lasts the full life cycle of an individual, there is a constant professional dilemma over whether to defer active (behavioral) or passive (structural) strategies. Behavioral or active strategies encourage individuals to take an active role in protecting themselves and their health, regardless of the effects of the environment, and consequently this can and does lead to political or social action is necessary to achieve structural change.

HYPOTHESIS

The existence of a high prevalence of behavioral risk factors as a precursor in the formation of infectious and chronic diseases and non chronic diseases the female student population. The existence of differences in the assessment of health risks and needs of the female population. Proof of the efficacy edukacije when changing knowledge habits and attitudes related to lifestyle.

RESEARCH GOALS

To evaluate frequency of the behavioural preventable risk factors as predictors of the emergence and development of infectious and noninfectious diseases among the female student population from the age of 18 to 24.

MATERIAL (RESPONDENTS) AND METHODS

The subjects were female student population who regularly attend the first and final year of study, four faculties of the University of Sarajevo. Participants are personally invited and asked to voluntarily participate in the focus groups. The focus group consisted of 8-12 members, and the expected number of participants of focus groups of 32-40. The study was designed as a retrospective-prospective study. Being applied method of triangulation - use of multiple types of different processing methods and data collection (quantitative and qualitative methods of research).

RESULTS OF RESEARCH

The risk of malnutrition is not a statistically significant decrease in student health and pharmaceutical faculties, but there was a statistically significant decrease in students of the Faculty of Political Sciences ($p = 0,016$) and a student of the Faculty of Transport and Communications ($p = 0,005$) were the only student Faculty of Transport and Communications after research increased knowledge about health and statistically reduce risk to health ($p < 0,05$). Only female students on Faculty of Pharmacy has not increased the score assessment of their own health ($p > 0,05$), while the other three faculties students included in this study there was a statistically significant increase in the score of their knowledge ($p < 0,05$). There were no statistically significant change in risk scores among the colleges. Conducted training did not affect the change of attitude on the use of health care and knowledge of women's health. The analysis of recent exposures smoking habits, use of alcohol and psychoactive supstanici depending on the research universities, only a student at the Faculty of Political Science has been a reduction of the score, which indicated that the interviewees of the faculty at the end of the study were exposed to smoking habits, use of alcohol and psychoactive drugs. Knowledge of sexual behavior improved with the educational program in which students in the curriculum of their studies do not receive information about this problem. After the research, analyzed questionnaires and assessment and student attitudes about health, it was concluded that there is a high prevalence of behavioral risk factors as precursor in the formation of infectious and non-infectious chronic diseases in the female student population.

CONCLUSION

It also concluded that following the completion of modular training for health, knowledge and attitude significantly changed in the direction of changes related to a healthy lifestyle, which confirmed the working hypothesis of this study.

KEY WORDS: behavioral determinants of health, students' population