# Parents' Perspectives on Healthy Lifestyle Practices for Special Need Students

# Ariff Mu'azzam Ab Halim<sup>\*</sup>, Mohd Mokhtar Tahar

Universiti Kebangsaan Malaysia, Selangor, Malaysia \*e-mail: p103095@siswa.ukm.edu.my

**Abstract**: This study was designed to examine the difference between healthy lifestyle in terms of balanced diet, physical exercises, emotional and self management among special need students in rural and urban areas. This study is conducted quantitatively by using the questionnaires that are valid and reliable. These questionnaires were adapted from the Healthy Lifestyle Instrument. The sample size of 40 parents from Cheras, Kuala Lumpur were participated for the urban area, while another size of 40 parents from Sabak Bernam, Selangor were participated on behalf of the rural area. Google form was used as the platform of the questionnaires and were distributed accordingly online. Inference analysis was used to study the research questions by using Statistical Package for the Social Sciences (SPPS) version 23.0. The analysis showed there was no significance in the difference between special need students in urban area and rural area towards their healthy lifestyle based from the three aspects. As a result, the main party should be obligated in adding healthy lifestyle practices among special need students in both urban and rural areas.

Keywords: Healthy Lifestyle, Balanced Diet, Special Need Students

# **INTRODUCTION**

Healthy lifestyle is one of the important components in living a better life and preventing diseases as well as obesity. World Health Organization defined healthy lifestyle as a physically, mentally and socially perfect condition an individual could have in addition to not contracting any diseases. This is aligned with the definition by Malaysia Ministry of Health (2006 & 2011) that stated that healthy lifestyle is comprised of three important components which are balanced diet, physical exercises and good sleeping schedule. Healthy lifestyle needs to be practised by every individual including special educational needs students and disabled individuals (OKU).

Special educational needs students are more exposed to various illnesses and obesity. According to Mudge et al. (2013), obesity occurs more frequent amongst disabled individuals and youths with a percentage of 27-62% compared to general population with 17-22%. It has been identified that this occurrence is because of the lack of activity amongst disabled individuals. Other than that, living environment also influences healthy lifestyle practice amongst special educational needs students.. According to a research by Singh and Mishra (2016), female teenagers from rural areas are less likely to be involved in sports and have imbalanced diet, although females are more involved in physical exercises and activities.

There may be differences in the implementation of healthy lifestyle between special educational needs students in urban and rural areas based on various factors like family background and environment. Based on the question, the objective of this research is to study the components of healthy lifestyle practices which are balanced diet intake, physical exercises and behaviour and mental management amongst special educational needs students implemented by parents in urban and rural areas. This research could provide assistance and information for responsible authorities to formulate a suitable guideline for special educational needs students to practise healthy lifestyle. Therefore, the research on healthy lifestyle practice for special educational needs students implemented by parents must be carried on to identify the application of healthy lifestyle practice in their daily life.

# METHOD

This research applied the quantitative method by distributing a questionnaire to parents with special educational needs children. The sampling technique used by the researchers was random purposive sampling. The research population consisted of parents with special educational needs children who received their education at Sekolah Menengah Kebangsaan Pendidikan Khas (SMKPK) or students of Program Pendidikan Khas Intergrasi (PPKI) at Sekolah Menengah Kebangsaan. Selangor and Kuala Lumpur were chosen as research samples because they fit the criteria of having two types of research locations, urban and rural areas that could produce a more accurate finding. Therefore, researchers had distributed the questionnaire to 40 parents in Cheras, Kuala Lumpur that made up the urban area category and to 40 parents from a village in Sabak Bernam, Selangor for the rural area category.

To acquire the research data, a set of questionnaire adapted from Instrumen Gaya Hidup Sihat (Fazil, Noor, Khalid, 2019) was constructed as the research instrument. The questionnaire was comprised of four (4) sections which were Section A, B, C and D and contained 35 items. Section A was the Demographic that was made of five (5) items to record the respondents' background. Section B had ten (10) items with the aim to evaluate the daily intake of balanced diet in special educational needs students. Section C which consisted of eight (8) items measured the physical exercises and activities done by special educational needs students in a week. Meanwhile, Section D with ten (10) items was to identify the management of a quality sleep schedule amongst special educational needs students. These three sections were evaluated based on the five points Likert scale starting from scale 1 None (T), scale 2 Very Rare (SJ), scale 3 Rare (J), scale 4 Frequent (K), and scale 5 Very Frequent (SK). This questionnaire was distributed via Google Form. The analysis of the research data was conducted through the computer software known as Statistical Package for Social Sciences (SPSS) version 23.0. Descriptive analysis was used to analyse data obtained in Section A (Demographic). This research also contained three dependent variables which are the intake of balanced diet, physical exercises and activities, and behaviour and mental management for special educational needs students in urban and rural areas. To measure the difference and relationship between the mentioned variables, this research used Independent T-test. The purpose of the test was to compare less than two (2) independent mean groups. Mean score was also utilized to observe the difference of each main research objective based on the mean score interpretation (Jainabee & Jamil, 2009).

# FINDING AND DISCUSSION

#### **Finding**(s)

The outcome from the analysis of the first research question shows that the intake of balanced diet amongst special educational needs students is at an average level. The mean score for urban students is 3.29 and 3.08 for rural students. The T value is 0.391 which indicates no significant difference in the intake of balanced diet amongst urban and rural special educational needs students.

#### Physical Exercises and Activities amongst Special Educational Needs Students

The second analysis touches on physical exercises and activities amongst special educational needs students. Urban students have a mean score of 1.70, which is lower than rural students who have a mean score of 1.92. However, both scores are still relatively low to indicate healthy lifestyle is being practised compared to the intake of balanced diet. The T value shows no significant difference in the physical exercises and activities between urban and rural special educational needs students because the T score, 0.353 exceeds 0.005.

# Behaviour and Mental Management of Special Educational Needs Students

The finding on behaviour and mental management of urban and rural special educational needs students signifies a high mean score. The mean score for urban students is 4.25, which is lower than the mean score for rural students, 4.37. The T value is 0.171 which suggests that there is no significant difference in behaviour and mental management between urban and rural special educational needs students.

Item	Intake of Balanced Diet		Physical Exercises and Activities		Behaviour and Mental Management	
	Urban	Rural	Urban	Rural	Urban	Rural
Mean	3.29	3.08	1.70	1.92	4.25	4.37
Value						
T Value		0.391		0.353		0.171

Table 1 Intake of Balanced Diet, Physical Exercises and Activities, and Behaviour and Mental
Management amongst Special Educational Needs Students

# **Discussion(s)**

The findings of this research show that healthy lifestyle practice for urban and rural special educational needs students is at an average level. The research findings are based on the three main components which are the intake of balanced diet, physical exercises and activities, and behaviour and mental management practised by special educational needs students in both urban and rural areas. These findings match with Mudge et al. (2013), who stated that obesity is 27-62% more common amongst disabled individuals and youths compared to general population (17-22%) due to the fact that special educational needs students have difficulties in living healthy lifestyle and performing physical exercises because of their physical disabilities.

# The Intake of Balanced Diet amongst Special Educational Needs Students

There is no notable difference in the intake of balanced diet amongst urban and rural special educational needs students based on the research analysis. However, the mean scores of both types of students are at an average level. Urban and rural special educational needs students are not consuming a balanced diet. This happens because the students prefer to consume junk and sugary food rather than vegetables and fruits. Azeman (2016) stated that most respondents are more inclined to consume junk food so that their money can be spent on something else such as clothes, entertainment and jewelleries.

In addition, Suhaimi (2016) supported this research by stating that the pattern of balanced diet consumption amongst IPTA undergraduates in Lembah Klang is at an unfavourable level.

# Physical Exercises and Activities amongst Special Educational Needs Students

The research analysis on physical exercises and activities amongst special educational needs students shows that there is no significant difference between urban and rural students. However, special educational needs students in urban area have a lower mean score (1.70) than special educational needs students in rural area (1.92). This is because special educational needs students rarely do physical exercises such as sports and physical activities. This research finding differs from a research by Singh and Mishra (2016) who discovered that female teenagers in rural area are less likely to get involved in sports and games and consume imbalanced diet, compared to their urban counterpart who are more involved in physical exercises.

# Behaviour and Mental Management of Special Educational Needs Students

The finding shows that both urban and rural students are at a high level. The mean score for urban special educational needs students is 4.25, lower than rural special educational needs students who have a 4.37 mean score. This shows that special educational needs students are not involved in unhealthy activities like smoking, consuming alcoholic beverages and abusing drugs. This finding, however, differs from the finding by Adolescent Health Survey (2017), who found that the number of smokers amongst teenagers aged 13 to 17 years increases from 11.5% to 13.8%. Furthermore, special educational needs students in both urban and rural areas also have a good sleeping schedule. This matches with the research conducted by Fang et. al (2019) who suggested that a nine-hour sleep possesses higher risk of stroke than a seven to eight-hour sleep every night.

# CONCLUSSION AND SUGGESTION Conclussion(s)

In conclusion, the research findings prove that healthy lifestyle practice amongst special educational needs students is at an average level. Although the intake of balanced diet and physical exercises and activities are at low and average levels respectively, behaviour and mental management is at a high level. This indicates that there is no significant difference between urban and rural special educational needs students.

However, the intake of balanced diet needs to be emphasized daily to prevent obesity and other fatal illnesses amongst special educational needs students. Furthermore, physical exercises and activities should be a routine for special educational needs students to keep them active and energetic like other students. Behaviour and mental management such as sleeping schedule must follow the guideline issued by the Malaysia Ministry of Health that suggests an eight-hour sleep daily to avoid stress and negative emotions in special educational needs students. Smoking, consuming alcoholic beverages and abusing drugs should not be allowed in order for special educational needs students to live healthy lifestyle.

# Suggestion(s)

Therefore, parents need to guide special educational needs students to live healthy lifestyle by consuming balanced diet, doing physical exercises and activities, and managing behaviour and mental. Healthy lifestyle could help students to be more active and focused during learning session and they could live their everyday lives like other students. It is everyone's responsibility to ensure healthy lifestyle is implemented amongst special educational needs students to produce a healthy and harmonious society.

# REFERENCES

- Ayub, S. H., Hassim, N., Yahya, A. H., Hamzah, M., & Bakar, M. Z. A. (2019). Exploring the Characteristics of Healthy Lifestyle Campaign on Social Media: A Case Study on FIT Malaysia. Jurnal Komunikasi: Malaysian Journal of Communication, 35(4), 322-336.
- Azeman, A. R. (2017). Pemilihan Makanan di Kalangan Pelajar Kolej Universiti Islam Melaka: Satu Tinjauan. Journal of Hospitality and Networks, 1(1), 71-80.
- Azhari, A. M., Kamarulzaman, M. H., Faisal, R. A., Hazir, N. M., Esrati, M. Z., Lim, M. R., & Ishak, N. M. (2017). Tahap Kecergasan Fizikal Di Kalangan Pelajar Pintar dan Berbakat. *E-proceeding of the 6th Global Summit on Education*, 187-197.
- Fazil, A. F. M., Noor, N. F. M., Khalid, N. I. M., Ahmad, H. N. L., Ismail, S., & Kamarudin, N. (2019). Healthy Lifestyle Instrument. *Journal of Human Capital Development (JHCD)*, *12*(1), 19-33.
- Fang, Q., Lai, X., Yang, L., Wang, Z., Zhan, Y., Zhou, L., ... & Zhang, X. (2019). Hearing loss is associated with increased stroke risk in the Dongfeng-Tongji Cohort. *Atherosclerosis*, 285, 10-16.
- Jainabee, K., & Jamil, A. (2009). Kualiti Kepimpinan Pengetua Sekolah-sekolah Menengah Kebangsaan Zon Selatan, Malaysia. In Seminar Nasional Pengurusan dan Kepimpinan Pendidikan Ke-16. Institut Aminudin Baki.

Malaysia Ministry of Health. (2011). Healthy Weight: A New Way of Looking At Your Weight and Health. Kuala Lumpur: KKM.

Malaysia Ministry of Health (2006). Laporan Kajian Kesihatan Morbiditi Kebangsaan

- Mudge, S., Kayes, N. M., Stavric, V. A., Channon, A. S., Kersten, P., & McPherson, K. M. (2013). Living well with disability: needs, values and competing factors. *International Journal of Behavioral Nutrition and Physical Activity*, 10(1), 1-12.
- Morbiditi dan Kesihatan Kebangsaan (NHMS). (2016). Gejala sakit mental pelajar boleh cetus masalah kronik. Kuala Lumpur: Unit Komunikasi Koperat, Berita Harian.
- Singh, A.P. and Mishra, G. (2016).Gender Differences in Lifestyle: Results of a Survey among Indian Schoolgoing Adolescents. Social Change, 46 (3): 428-443.
- Suhaimi, T. B. (2016). Faktor Pemilihan Makanan Sebagai Peramal Kepelbagaian Makanan Dalam Kalangan Pelajar Universiti Awam Di Lembah Klang, Malaysia.