Teachers' Lifestyle who use ICTs in Basic Education during COVID-19: A case study

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Abstract

Introduction: lifestyle is an indicator that refers to a set of behaviors and behaviors known as habits that people adopt, and these can be good or bad and this will depend on the life condition of the individual.

Aim: to determine the lifestyle of teachers who use ICTs in basic education during COVID-19 in North Lima.

Methods: a quantitative, descriptive-cross-sectional study, consisting of a total of 160 patients attending a health facility, who answered a questionnaire of sociodemographic data and the fantastic questionnaire.

Results: 5% of the participants have a lifestyle is in danger, 8.1% have a bad lifestyle, 52.5% have a regular lifestyle, 16.3% good lifestyle and 18.1% excellent lifestyle. With respect to the dimension family and friends that, 88.1% have an excellent lifestyle and 11.9% regular lifestyle. With respect to the physical activity dimension, 86.9% have an excellent lifestyle, 2.5% a good lifestyle and 10.6% a bad lifestyle.

Conclusions: It is concluded that educational counseling should be implemented on how to maintain a healthy lifestyle and how to prevent risk behaviors that harm health. It is concluded that health should be promoted, since it allows educating people to put into practice how to improve their lifestyle and how to have a healthy diet.

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1. Introduction

Social isolation caused by the coronavirus (COVID-19) pandemic has drastically affected lifestyles (EVs), from sedentary behaviors to reduced physical activity, from disrupted sleep patterns to altered eating habits. As a result, severe mental and emotional responses have been recorded. There was a significant decrease in physical and other significant activities of daily living, leisure, social activity, and education and all this has given great importance for the use of Information and Communication Technologies (ICTs) [1].

Lifestyle is an indicator that refers to a set of behaviors and behaviors known as habits that people adopt, and these can be good or bad and this will depend on the life condition of the individual [2][3]. Likewise, lifestyle in simple terms is a way of life used by individuals, groups and nations and is formed in a geographical, economic, political, cultural and religious context and this refers to the characteristics, behaviors and daily functions such as in their work environment, activities, fun and diet [3][4]; Although, with the use of ICTs there have been different positive and negative changes related to the health and well-being of the person, since ICTs influence the way of living and also how to adapt to situations in transformation.[5].

Although, the new coronavirus disease has generated an unprecedented health crisis threatening the health of the world's population. Governments took immediate measures such as mandatory lockdowns and a series of social restrictions, all to prevent the spread of contagion in the population. This extreme situation led to the appearance of physical and mental health problems of regular basic education teachers, as well as the consumption of harmful substances [6][7].

At present, people's behaviors and lifestyles were changing and in turn affecting health. The health condition of many people changed and became worse than before the pandemic [8]. Hence, the importance of this study that seeks to assess the lifestyle of the people participating in this study can be highlighted, with this it will be possible to have a more specific reading of their health condition and thus be able to act for their benefit [9].

In a study conducted in India, they conducted a lifestyle study on 1000 adolescents and young adults, whose findings indicated that 54.7% have a high level of nutrition, followed by 21.7% very high, 18.3% medium and 5.3% low, also indicated that the average duration of sleep changed from 6.85 hours to 8.17 hours, 51.9% experienced an increase in stress levels, 76.4% had an increase in food intake, and 38.6% had a decrease in physical activity [10].

A study conducted in the Middle East and North Africa in lockdown, involving 2970 participants from 18 countries, reported that during the pandemic more than 30% reported weight gain, 6.2% consumed five or more meals per day compared to 2.2% before the pandemic (P< 0.001) and 48.8% did not consume fruits daily. In addition, 39.1% did not perform physical activity and more than 35% spent more than 5 h/d in front of screens [11].

In a study conducted in Colombia, they carried out research work on 642 participants, whose results indicated that 73% of them spend significant time in sedentary behaviors, also indicated inadequate levels in physical activity (53.9%), nutrition (97.6%), tobacco (68.7%), personality (88.7%) and introspection (81.3%) [12].

A study conducted in Mexico in 390 women, whose findings indicate that the participants presented a fantastic lifestyle with a coefficient of 0.121, followed by good with 0.069 and adequate with 0.019, also showed respondents that family and friends predominated (ME = 3.8), physical activity (ME = 1.8), nutrition (ME = 2.4), tobacco (ME = 3.6), alcohol (ME=4.0), sleep and stress (ME=2.6), personality (ME=3.3) and introspection (ME=3.2) [13].

The changes in eating and lifestyle habits during the confinement period due to the first wave of the COVID-19 pandemic in Ibero-American countries were evident. An investigation was conducted in 6 325 participants from Brazil (N=2 171), Argentina (N=1 111), Peru (N=1 174), Mexico (N=686), and Spain (N=1 183). Whose results indicated that 61.6% of the Spanish participants did not improve or worsen their eating pattern, followed by 2.7% if there were changes in the elections and in 15.7%, they changed for less healthy options. While Argentina and Brazil showed the highest proportion of changes to healthier foods, Peruvians and Mexicans were less likely to make healthy changes in food consumption [14].

Another study on eating habits and lifestyles made in our country in 1176 participants indicates that the majority reported weight gain (1 to 3 kg) and 35.7% were overweight. Life habits showed that 54.8% reported physical activity and 37.2% slept less. Eating habits before and during the COVID-19 pandemic showed that vegetables, legumes, and eggs showed a significant increase in consumption during social isolation, while 12 bakery products meats, snacks, soft drinks, and fast food decreased in consumption [15].

Therefore, the research objective was to determine the lifestyle in teachers who use ICTs in basic education during COVID-19 in North Lima.

2. Methods

A. Research type and Design
In the study, according to its properties is quantitative, with respect to its methodology is descriptive-transversal non-experimental [16].

B. Population
The population is made up of a total of 160 people who are treated in a health facility in North Lima

C. Inclusion Criteria
- Participants over 18 years old
- Participants who voluntarily agree to be in the study

D. Technique and Instrument
The data collection technique was the survey, in which sociodemographic data and the FANTASTICO questionnaire are present.

The FANTASTIC questionnaire is an instrument that contains 30 items distributed in 10 dimensions (family and friends, physical activity, nutrition, tobacco, alcohol, sleep and stress, personality type, introspection, driving and work; and other behaviors), in which it is qualified by a Likert-type scale, in which it has alternatives in a polynomic way, where "0 = never", "1 = sometimes" and "2 = always", where the total score is from 0 to 100 points and the range of alternatives is "there is danger", "bad", "fair", "good" and "excellent" [17].

The reliability of the instrument was determined according to Cronbach's alpha statistical test, obtaining a coefficient of 0.949 ($\alpha > 0.7$).

E. Place and Application of the Instrument
The previous coordination was made to be able to carry out the study within the educational institution and thus they were also provided with the necessary information and thus have a knowledge of what the research is about.

3. Results

In Figure 1, 5% of the participants have a lifestyle is in danger, 8.1% have a bad lifestyle, 52.5% have a regular lifestyle, 16.3% good lifestyle and 18.1% excellent lifestyle.
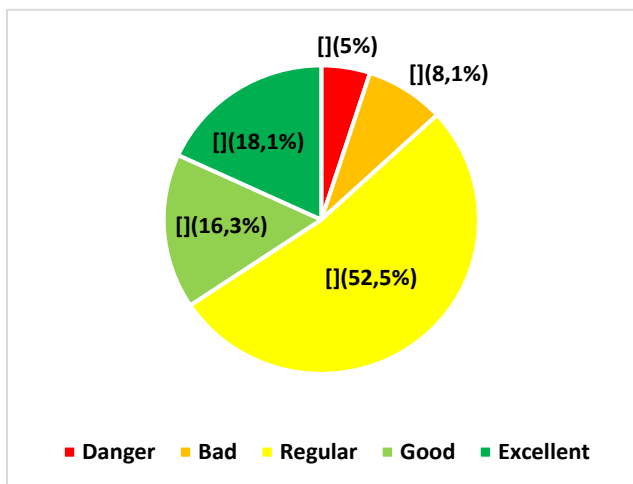

Fig. 1. Lifestyle in teachers who use ICTs in basic education during COVID-19 in North Lima.

In Figure 2, with respect to the dimension family and friends that, 88.1% have an excellent lifestyle and 11.9% regular lifestyle.
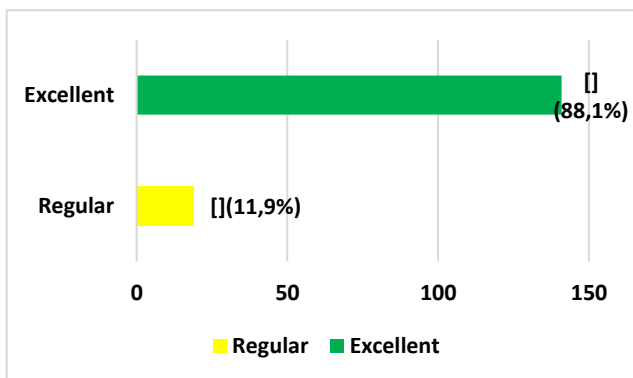

Fig. 2. Lifestyle in its dimension family and friends in teachers who use ICTs in basic education during COVID-19 in North Lima.

In Figure 3, with respect to the physical activity dimension, 86.9% have an excellent lifestyle, 2.5% a good lifestyle and 10.6% a bad lifestyle.
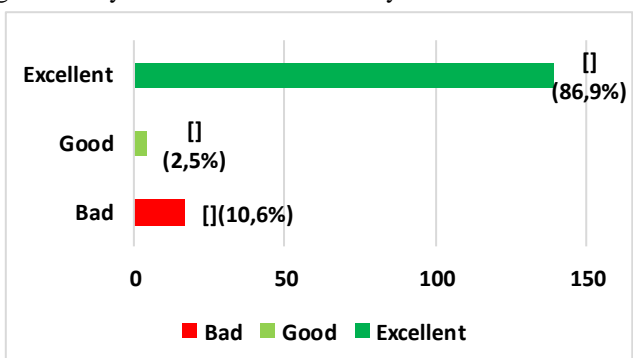

Fig. 3. Lifestyle in its dimension physical activity in teachers who use ICTs in basic education during COVID-19 in North Lima.

In Figure 4, with respect to the nutrition dimension, 22.5% of participants have an excellent lifestyle, 5.6% good lifestyle, 1.9% regular lifestyle, 68.8% good lifestyle and 22.5% their lifestyle is in danger.
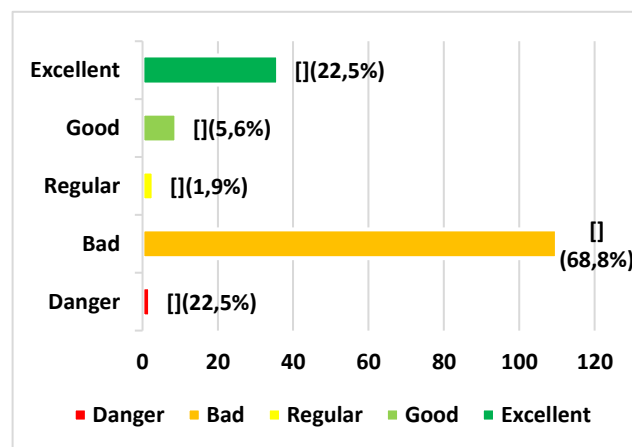

Fig. 4. Lifestyle in its nutritional dimension in teachers who use ICTs in basic education during COVID-19 in North Lima.

In Figure 5, we can see with respect to the tobacco dimension that, 15.6% of the participants have a good lifestyle, 1.3% regular lifestyle, 6.9% bad lifestyle and 76.3% their lifestyle is in danger.
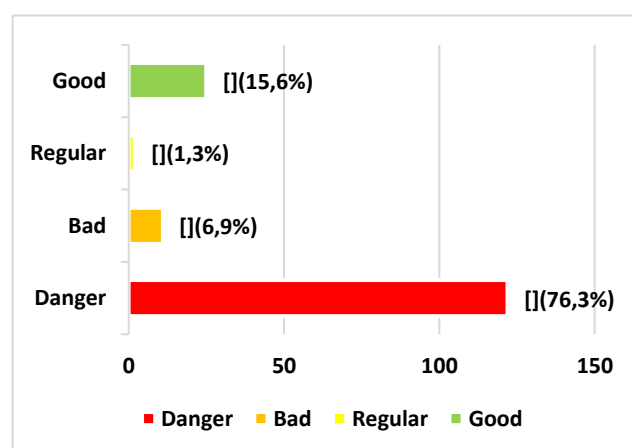

Fig. 5. Lifestyle in its tobacco dimension in teachers who use ICTs in basic education during COVID-19 in North Lima.

In Figure 6, with respect to the alcohol dimension, 16.9% of the participants have an excellent lifestyle, 16.9% good lifestyle, 0.6% bad lifestyle and 65.6% their lifestyle is in danger.
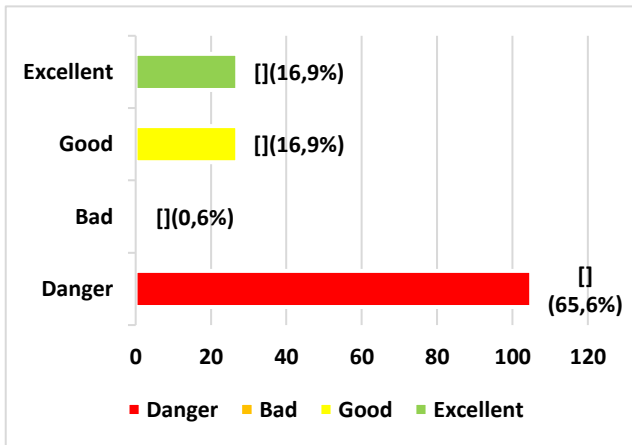

Fig. 6. Lifestyle in its alcohol dimension in teachers who use ICTs in basic education during COVID-19 in North Lima.

In Figure 7, with respect to the sleep and stress dimension, 15.6% of participants have an excellent lifestyle, 1.9% good lifestyle, 23.8% regular lifestyle, 52.5% good lifestyle and 6.3% their lifestyle is in danger.
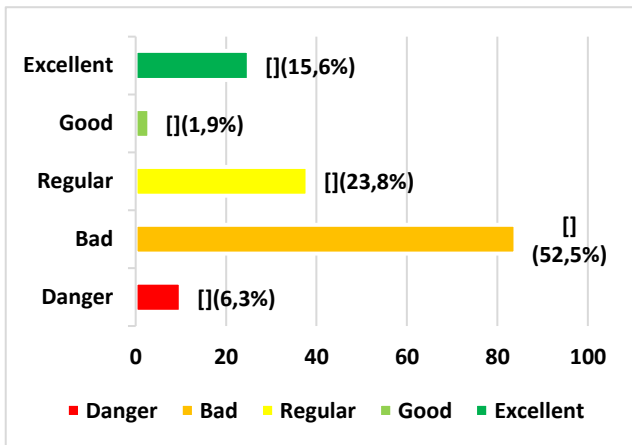

Fig. 7. Lifestyle in its dimension sleep and stress in teachers who use ICTs in basic education during COVID-19 in North Lima.

In Figure 8, with respect to the dimension personality type, 69.4% of participants have an excellent lifestyle, 1.9% good lifestyle, 16.9% regular lifestyle, 6.3% bad lifestyle and 5.6% their lifestyle is in danger.
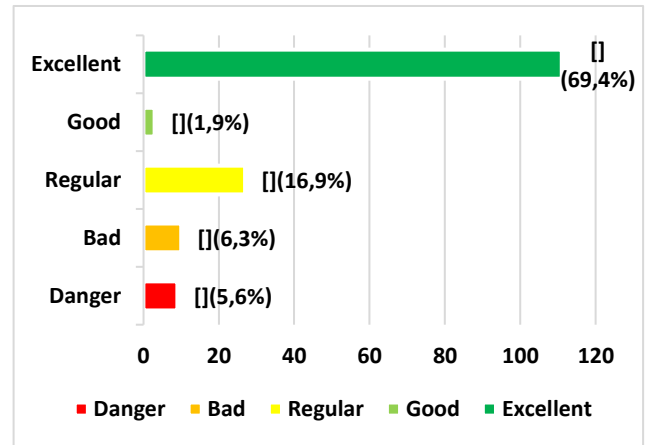

Fig. 8. Lifestyle in its personality dimension in teachers who use ICTs in basic education during COVID-19 in North Lima.

In Figure 9, we can see with respect to the introspection dimension that, 16.9% have an excellent lifestyle, 16.9% good lifestyle, 6.3% regular due style, 55% bad lifestyle and 5% their lifestyle is in danger.
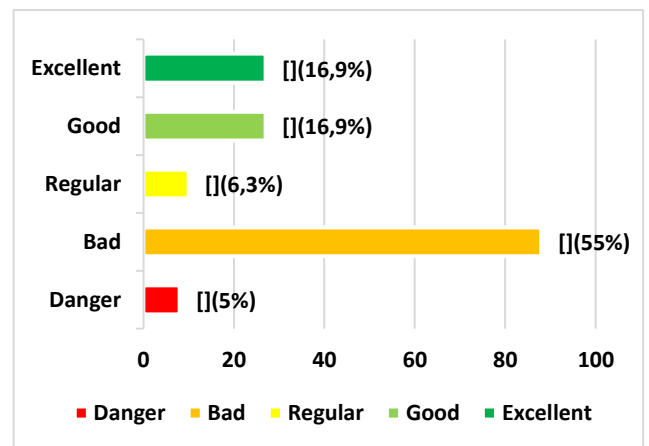

Fig. 9. Lifestyle in its dimension instrospeccion in teachers who use ICTs in basic education during COVID-19 in North Lima.

In Figure 10, with respect to the control dimension of sexuality, 86.9% of the participants have an excellent lifestyle, 0.6% have a regular lifestyle, 1.3% have a bad lifestyle and 11.3% their lifestyle is in danger.
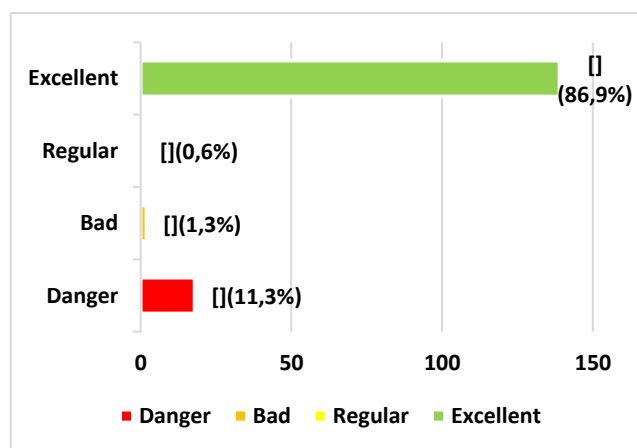
Fig. 10. Lifestyle in its dimension control of sexuality in teachers who use ICTs in basic education during COVID-19 in North Lima.

In Figure 10, with respect to the dimension other behaviors that, 19.4% of the participants have an excellent lifestyle, 15.6% have a good lifestyle, 53.8% have a regular lifestyle, 6.3% bad lifestyle and 5% their lifestyle is in danger.
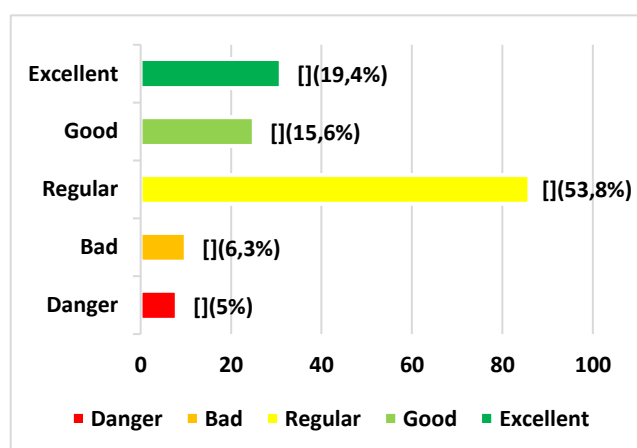

Fig. 11. Lifestyle in its dimension Other behaviors in teachers who use ICTs in basic education during COVID-19 in North Lima.

4. Discussion

The pandemic is still among us, managing to monopolize all health care, leaving aside essential activities such as health promotion. Added to this, the measures taken in the pandemic, as well as its consequences of regular basic education teachers, allowed many risk factors to be present, in addition to this new normality altered the EVs of many people [18-24]. Given this, it was proposed in this study to assess the EV in the participants, understanding that this will give elements that allow to know indirectly their health condition, so that care actions

can be taken conducive to improving their well-being and health [25-29].

As for lifestyle, according to their results this could be due to the social environment, social and health determinants, educational level, degree of awareness about their health, type of diet, socioeconomic level, given that, factors such as low health, living in precarious conditions, low family income, living alone, being single, Inadequate work conditions and not having a family and social support network are linked to inadequate health practices [30-36].

As for the dimensions, we can observe according to their results that they may be since they have a good network of family and social support that positively influence their EV and habits [37-39]. However, another percentage indicated regular levels, since not all participants receive the support of their family/friends or these inadequately influence their health habits and their life, these results could also be related to the level of education [40-43].

Likewise, physical activity and nutrition go hand in hand, since they have adequate care on their EV and periodically undergo their routine medical check-ups, for a good state of general health and physical well-being [44-47]. They also point out the danger of sedentary lifestyle, the presence of overweight and obesity, situations that affect the state of health. Each of these factors have a detrimental impact on the participant's EV. The pandemic made us more sedentary and being at home for extended times, more food was ingested.

Likewise, the dimension tobacco and alcohol, as toxic substances for the body and harmful to health since it acts as a drug on the central nervous system 17 depressing it and generates changes in the behavior and self-control of a person. During the pandemic, in the face of uncertainty, fear and mandatory isolation, many people took refuge in the consumption of harmful substances and alcohol [48-51].

As for sleep and stress, they represent the presence of physical fatigue, deterioration of health and presence of stressors, this is due to sedentary lifestyle, excess activities that do not allow rest, there is usually altered the sleep pattern and decreases the well-being of the person triggering feelings of stress due to physiological imbalance [52-56].

Finally, it should be noted that the results of this study show value that concern and should invite reflection and action in health. The pandemic leaves us with many troubles such as the cut in primary health care for two years, neglect of health promotion programs and the imposed social restrictions that affected the physical and mental health of many people [57-59]. Actions must be resumed to ensure the health of the general population, guiding them to changes in their health to ensure that they resume healthy lifestyle practices, since this will generate well-being in them. Nurses have an important challenge to assume, where efforts are redoubled to recover people's health and address the negative consequences that this pandemic leaves us.

5. Conclusions

It is concluded that educational counseling should be implemented on how to maintain a healthy lifestyle and how to prevent risk behaviors that harm health.

It is concluded that health should be promoted, since it allows educating people to put into practice how to improve their lifestyle and how to have a healthy diet.

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