

# YOUNG PEOPLE'S LIFESTYLE AS A DETERMINANT OF FUTURE HEALTH OF THE SOCIETY, BASED ON TOURISM AND LEISURE STUDENTS FROM THE UNIVERSITY OF SZCZECIN

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## **Abstract**

*A 'healthy lifestyle' means taking conscious actions towards increasing one's health potential. Pro-health behaviors include: physical exercise and active forms of leisure, healthy nutrition, amount and quality of sleep, refraining from smoking cigarettes and limiting alcohol consumption, as well as refraining from drug use.*

*This study is aimed at diagnosing lifestyle of young people who study Tourism and Leisure in Szczecin, Poland.*

*The research was carried out among 127 students of Tourism and Leisure graduate studies, offered jointly by the Department of Physical Education and Health Promotion and Faculty of Management and Economics of Services at the University of Szczecin, Poland. The average age of subjects was  $23.5 \pm 0.9$ . The research employed the diagnostic poll method with a survey; author's own survey was used. Results were statistically analyzed with Kruskal-Wallis test.*

*15.3% students suffered from overweight or obesity. On average, 28.8% of subjects were familiar with the definition of BMI. Only 65.4% of students declared regular physical exercise. Main obstacles to physical activity mentioned by students were: lack of time (45%), lack of willingness, laziness (40%) and lack of money (26.6%). Students who specialized in Health Aspects of Tourism and Leisure declared more frequent ( $p < 0.05$ ) consumption of vegetables, fruit, milk and dairy products, along with reduced consumption of sweets, sugar and processed food, in comparison to students who specialized in Tourism Business. 21.7% of subjects reported smoking cigarettes and 100% admitted drinking alcohol. Drug use was reported significantly more often by students of Tourism Business (13.3%).*

*Students' lifestyle was dominated by anti-health behaviors, such as insufficient physical exercise, passive leisure, smoking cigarettes and drinking alcohol. These anti-health behaviors may lead to diseases of affluence in their future lives. Therefore, it is necessary to include pro-health education in students' curricula; consideration should also be given to target and actual effects of education at Polish universities which offer Economics-related studies.*

**Key words:** *lifestyle, health, healthy behaviors, physical activity, students*

## **Introduction**

The term 'lifestyle' has been used in literature related to many fields, such as Sociology, Psychology, Pedagogy, Medicine, Public Health, Economics and Physical Culture. Woynarowska (2013) defines lifestyle as a set of decisions (actions) of an individual that influence their health and which may be controlled by the individual to certain extent (approx. 50-52% of total influence).

Analyzing links between lifestyle and health, a distinction is made between pro-health and anti-health lifestyle. A healthy lifestyle means taking conscious actions towards increasing one's health potential.

One of such actions may be physical activity, which is an independent health factor; it is positioned at the heart of healthy lifestyle as an important determinant of maintaining health. Physical activity also serves as a part of pro-health education of the society (Bendíková 2010; Paczyńska-Jędrycka and Łubkowska 2014). According to Drabik (2008), 'it may be said that physical activity acts as a guardian of other behaviors. By controlling these behaviors, one reduces other risk factors. Thus, from the public health's perspective, there is nothing more important than promoting physical activity...'

It is believed that promoting physical activity as part of the health-related fitness (H-RF) program is one of the most important preventive measures. Nowadays, physical agility is seen as a sign of good health (Żukowska and Szark 2010). It must be noted that human condition is influenced by both genetic factors, as well as important environmental factors (Łubkowska and Tarnowski 2012; Nowak 2011; Sygit 2011).

Positive impact of physical activity, especially regular work-out, on health is not a new or original idea. In fact, first information about using organized physical exercise to improve health (Drygas and Jegier 2003) may be traced to as early as 2500 BC in ancient China. Research carried out in many countries brought a lot of convincing evidence which point to beneficial effects of regular workout in prevention of cardiovascular diseases, certain forms of cancer, osteoporosis, bad posture, overweight and obesity, as well as type II diabetes and depression (Drabik 2008). Physical activity may also be perceived as an important element of psycho-motor recovery (Szark and Żukowska 2010).

Physical and sports education should be regarded as an educational institution (environment) with the content consisting of physical activities. It is the only school subject that may have a direct impact on pupils' health, affecting their lifestyle even in adulthood. It is the key factor of enhancing pupils' and teenagers' physical activity and it plays an important role in primary disease prevention (Bendíková 2010). Furthermore, understanding health-oriented fitness is also of utmost importance (Bendíková 2009).

Apart from physical activity, other important factors of healthy lifestyle are: healthy nutrition, refraining from smoking cigarettes and using psychoactive substances, limited alcohol consumption, appropriate amount and quality of sleep (Woynarowska 2013).

## **Aim**

The research was focused on healthy lifestyle of students at the University of Szczecin, Tourism and Leisure Faculty, provided by the Department of Physical Education and Health Promotion (WKFiPZ) with specialization in Health Aspects of Tourism and Leisure and Faculty of Management and Economics of Services (WZiEU) with specialization in Tourism Business. The main aim of the research was to investigate actual lifestyle of young people who study Tourism and Leisure, as well as their consciously chosen health-related behaviors, such as physical exercise, nutrition, using stimulants and sleep.

This analysis was aimed at answering the following question: 'Does students' specialization (lack or presence of health-related subjects in their academic curricula) affects their lifestyles in terms of health behaviors?'

The following detailed aims were also pursued:

1. Comparison of physical activity of Tourism and Leisure students, based on their specialization.
2. Determining factors which influence taking up physical activity by students.
3. Determining the most common obstacles to physical activity.
4. Determining leisure habits of students.
5. Determining nutrition habits of students.
6. Determining students' attitude towards using stimulants.
7. Determining amount and quality of sleep of students.

## **Material and Methods**

The research employed the diagnostic poll method. It included author's own questionnaire which consisted of demographics and 31 closed-end and semi open-ended questions. Questions focused on five aspects of healthy lifestyle of students, such as: physical activity, nutrition, stimulants use (tobacco, alcohol), sleep. Smoking tobacco was defined as smoking at least 1 cigarette per day; drinking alcohol was defined as consuming at least 25 g of ethanol (in any form) more than once a month.

The research was carried out in 2013 among 127 students (66.8% women and 33.3% men), graduate students of Tourism and Leisure at the University of Szczecin. The average age of subjects was  $23.5 \pm 0.9$ . Most of them (50.8%) lived at their family homes, 32.7% in a privately rented rooms or apartments, and 16.5% in dormitories. 46.7% of subjects declared professional activity: 11.7% worked full-time, 13.3% worked part-time and 21.7% worked only at the weekends and on holidays.

Non-probability sampling was used to select subjects. There were 65 subjects (51.2%) who studied at the Department of Physical Education and Health Promotion whose Tourism and Leisure curriculum included health aspects of tourism and leisure; there were also 62 subjects (48.8%) who studied at the Faculty of Management and Economics of Services and specialized in Tourism Business. Table 1 presents characteristics of these two sub-groups.

Curriculum of graduate students studying Health Aspects of Tourism included pro-health education during such classes as: Health Education, Relaxation Techniques, Healthcare in Tourism, Bio-regeneration in Sport and Leisure, Introduction to Physiotherapy, Kinesiotherapy, Spa Therapy, Injury Prevention in Physical Recreation, Gerontopedagogics, Introduction to Classic Massage, Sports Massage, and Rehabilitating Patients with Sensory Disorders. Tourism Business students learnt about health issues only during Health Tourism classes.

Upon graduation, students who specialized in Health Aspects of Tourism and Leisure are fully prepared to design, plan and work in the field of Tourism and Leisure, with a special consideration given to health aspects and motor rehabilitation. Alumni are qualified to work at bio-regeneration parlors, spa centers, sports and leisure units, social organizations, foundations and associations. They can also conduct independent business activities.

As for Tourism Business specialization, alumni are equipped with knowledge and skills needed in Tourism Business sector in terms of marketing, self-government and administration. Thus, these graduates are competent to work as specialist in tourism or tourism-related companies and institutions. Alumni are also able to conduct independent business activities.

**Table 1** Characteristics of sub-groups (n=127)

Questions	Specialized in Health Aspects of Tourism at WKFiPZ	Specialized in Tourism Business at WZiEU	Total	Statistically significant differences between subgroups (p <0.05)
Number of subjects	n=65 (51.2%)	n=62 (48.8%)	n=127 (100.0%)	sns
Number of students/specialization	n=137	n=114	n=251	sns
% of students participating in the research	47.4	54.3	50.8	sns
Age (years) <sup>1</sup>	23.1 ± 1.2	23.9 ± 0.6	23.5 ± 0.9	sns
Sex (M/F)	n=20/45 (30.8%/69.2%)	n=23/39 (37.1%/62.9%)	43/84 (33.8%/66.2%)	sns
Professional activity (%)	43.3	50.0	46.6	sns

Legend: <sup>1</sup> Values represent arithmetic means ± standard deviation.

Abbreviations: WKFiPZ - Department of Physical Education and Health Promotion; WZiEU - Faculty of Management and Economics of Services; sns – statistically non-significant.

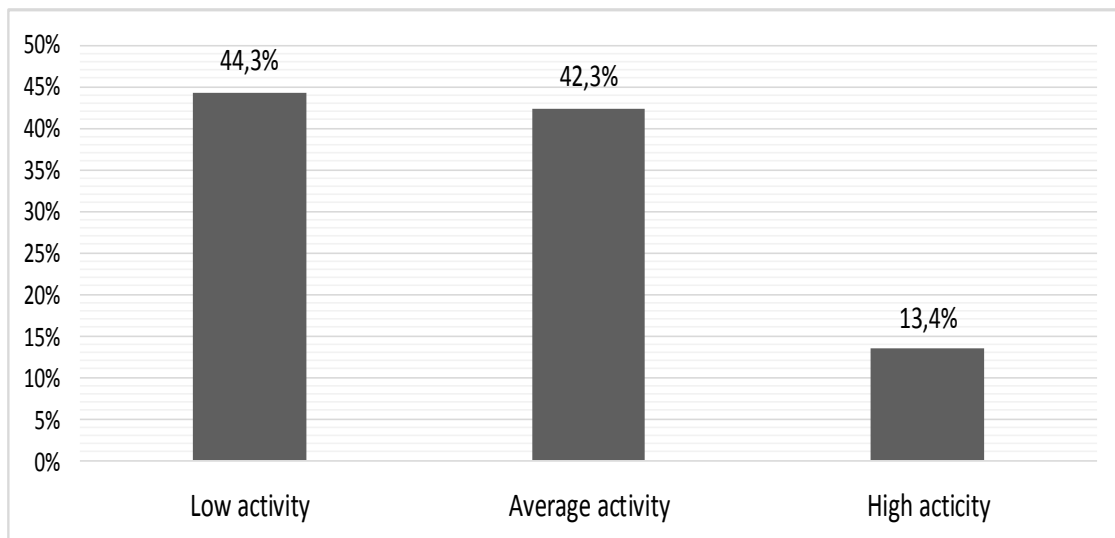
The research used critical analysis method and statistical method. The statistical analysis of results was performed with computer software Statistica v.10.0 (StatSoft Polska, Kraków). Results were presented as average values and standard deviations, and expressed as percentage. Due to lack of normal parameter distribution, differences between averages were checked with non-parametric Kruskal-Wallis test. Values for p < 0.05 were considered statistically significant.

## Results

While analyzing the results, students' behaviors related to the above-mentioned lifestyle choices were determined.

### Physical activity versus unhealthy body mass

15.3% of students reported overweight or obesity. 58.6% of them were unable to determine that BMI over 25kg/m<sup>2</sup> signified overweight; 65% didn't know that BMI over 30kg/m<sup>2</sup> is a sign of obesity. 65.4% of students were physically active. Over 35% students declared working out 1-2 times per week; 19% reported physical activity 3-4 times per week; slightly over 4% of subjects exercised 5-6 times per week, and a similar proportion worked out every day. Approximately 3% of subjects worked out less frequently than once per week, while 35% of them were not active at all. Only 13.4% of subjects rated their level of physical activity as high; 42.3% considered it medium and 44.3% categorized it as low (Figure 1).



**Figure 1** Levels of physical activity of students (n=127)

This subjective assessment of students' physical activity was confirmed by the amount of time they dedicated to exercise. Leisure workout, defined as exercise lasting minimum 30 minutes, was declared by only 37% of students.

Preferred forms of workout were: running (38.5%), gym (35.4%), walking and Nordic walking (35.8%), gymnastics and exercising at home (33.3%), swimming (30.7%), team sports (28.2%), cycling (23.1%), aerobics and fitness (15.3%), and dance (7.6%).

### **Physical activity versus free time**

Half of subjects claimed to have enough free time; 6.6% reported having a lot of free time; 38.3% felt they had little free time, while 5% reported having no free time. The most popular forms of spending free time were: using the computer (games, movies, the Internet) – it was mentioned by 86.6% of subjects. They also reported watching TV and movies on DVD (66.6%), listening to music (53.5%), meeting friends (54.3%), physical activity (44.1%), and reading books (40%). Worryingly, 21.8% of subjects preferred completely passive leisure.

### **Motivation and obstacles to taking up physical activity**

Main motivation for taking up physical activity was: improving and maintaining fitness (76.9%), increased physical and mental well-being (66.6%), watching one's figure (46.1%), health considerations (43.6%), pleasure, fun (42.3%), emotional outlet (38.4%), self-realization (33.3%), relaxation (20.6%).

The most common obstacles / reasons that prevented subjects from physical activity were: lack of free time (45%), lack of motivation, will power (45%), laziness (40%), lack of money, high costs (26.6%), lack of company (23.3%), difficult access to equipment and facilities (13.3%), poor health (8.3%), reluctance (6.7%), and fear of injuries (3.3%). Subjects did not select the following responses: no need for physical activity (0%) and lack of knowledge about needs and beneficial effect on the body (0%).

## **Nutrition habits**

Only 28% of subjects reported regular meals; 45% sometimes ate their meals regularly, while 27% ate irregularly. For over ¾ of subjects (78.3%), regularity of meals was mostly impeded by work/study load; for 13.7% it was laziness and no need for regular meals, while 8% reported lack of knowledge and proper nutrition habits. Over 78% of subjects reported eating 3 meals a day, 5% ate only 1-2 meals, while 17% consumed 4 or more meals daily. Almost half of subjects confirmed eating at night. Also nearly half of them (46.6%) reported eating their last meal 1-2 hours before going to sleep.

Overall, vegetables were consumed daily by 65% of subjects, 63.3% consumed milk and dairy products, 58.3% ate fruit, and 53.3% meat and its derivatives. Only 11.7% ate fish a couple of times per week; 10% ate fish once per week; 40% ate fish once per month, 30% ate fish very rarely, and 8.3% didn't eat fish at all.

## **Risky behaviors**

21.7% of students smoked cigarettes. 69% of smokers reported regular smoking, while 30.9% smoked only occasionally. The most common trigger for occasional smoking was alcohol consumption which resulted in an urge to smoke – this option was selected by over 55% of subjects, while 45% indicated reduction of stress.

There were no teetotalers in the group. 65% declared drinking alcohol occasionally, in moderation, while 35% reported occasional drinking, but without moderation. 33.3% of subjects consumed alcohol a number of times per month, 26.6% - once per week, and 6.6% a number of times per week. The most popular alcohol among subjects was beer (48.3%), but students also tended to drink wine (25%) and vodka (23.3%). The research suggested that over half of subjects (53.3%) drank alcohol to reduce nervousness.

Over 8% of students admitted using drugs, while 20% reported having experimented with them, but not using them regularly. Subjects explained their usage of drugs with need for new experiences, curiosity (76.4%) and as a way to distance themselves from problems and stress (5.9%). 35% confirmed using drugs with their friends, and 6% used drugs at the urging of friends. 5.8% subjects reported regular use of drugs.

## **Sleep**

The research suggests that on work/schooldays, 75% of subjects slept from 6-7 hours, while only 2% of them slept for merely 2-3 hours. At the weekends and on holiday 61.6% of subjects slept for 8-9 hours. Majority of subjects admitted having irregular daily routines, and over three-quarters (78.3%) of subjects reported problems with falling asleep (55% experienced these problems sporadically, while 23.3% often).

## **Comparison of sub-group with different specializations**

Table 2 Lifestyle choices of students of Tourism and Leisure at the University of Szczecin, divided into 2 sub-groups with different specializations (n=127)

Questions	Specialized in Health Aspects of Tourism at WKFiPZ (n=65)	Specialized in Tourism Business at WZiEU (n=62)	Total	p
	in %			
overweight/ obesity BMI>25kg/m <sup>2</sup>	13.3	17.3	15.3	ns
knowing the definition of BMI	39.9	17.7	28.8	<0.05
Physical activity	66.6	64.2	65.4	sns
Physical activity in free time	36.6	32.1	34.3	sns
Regular meals	30.0	26.0	28.0	sns
Eating at night	53.3	50.1	51.7	sns
Eating vegetables	73.3	56.7	65.0	<0.05
Eating fruit	73.3	43.3	58.3	<0.05
Consumption of milk and dairy products	73.3	53.3	63.3	<0.05
Consumption of meat and its derivatives	50.1	56.5	53.3	sns
Consumption of fish (at least once per week)	10.2	33.3	21.7	<0.05
Reducing salt intake	50.0	43.3	46.6	sns
Reducing fat intake	46.6	60.0	53.3	sns
Reducing sweets and sugar intake	76.6	53.3	64.9	<0.05
Reducing amount of processed food	53.3	13.3	66.6	0.05
Alcohol consumption	100.0	100.0	100.0	sns
Occasional alcohol consumption, without moderation	30.0	40.0	35.0	sns
Smoking tobacco	20.0	23.4	21.7	sns
Regular smoking	69.0	69.0	69.0	sns
Drug use	3.3	13.3	8.3	<0.05
Amount of sleep less than 6 hours	16.6	6.6	11.6	sns

Legend:

Abbreviations: WKFiPZ - Department of Physical Education and Health Promotion; WZiEU - Faculty of Management and Economics of Services; sns – statistically non-significant

While comparing the subgroups (students were divided according to their specializations), the following statistically significant differences were noted:

- Students of the Department of Physical Education and Health Promotion (WKFiPZ) correctly defined BMI index more often than students of Faculty of Management and Economics of Services (WZiEU); (WKFiPZ): 39.9%; WZiEU: 17.7%);
- WKFiPZ students declared consumption of vegetable more often than WZiEU students (WKFiPZ: 73.3%; WZiEU: 56.7%), consumption of fruit (WKFiPZ: 73.3%; WZiEU: 43.3%) and milk (WKFiPZ: 73.3%; WZiEU: 53.3%);
- WKFiPZ students declared reduced consumption of sweets and sugar more often than WZiEU students (WKFiPZ: 76.6%; WZiEU: 53.3%), and limited consumption of processed food (WKFiPZ: 53.3%; WZiEU: 13.3%);
- WZiEU students declared consuming fish more often than WKFiPZ students (WZiEU: 33.3%; WKFiPZ: 10.2%);
- WZiEU students declared drug use more often than WKFiPZ students (WZiEU: 13.3%; WKFiPZ: 3.3%).

## Discussion

The analyzed results point to a growing prevalence of unhealthy behaviors among students. In this research, 15% of students were diagnosed with overweight or obesity, which confirms exponential increase of obesity (number of obese people has significantly increased in the past 30 years). It is especially visible in children and youth around the world (Han et al. 2010). In the USA, over 64% of adults suffer from overweight and obesity (Flegal et al. 2002). In Poland, in 2003 a study conducted by Pol-MONICA Bis pointed to 26% of obese men and 24% of obese women aged 20-74 (Rywik et al. 2003). In 2004, according to LIPIDOGRAM 2004 study, there were 48% of overweight men and 39.2% of women, as well as 32.8% of obese men and 31.2% of obese women (Mastej et al. 2006).

Usually, obesity during adolescence results in obesity in adulthood. With time, it leads to severe complications which shorten life expectancy (Fichna and Skowrońska 2006; Olshansky et al. 2005). Obesity is one of the main risk factors for incidence of degenerative overload changes of the osteoarticular system. Author's own study (Łubkowska et al. 2015) which encompassed 500 girls aged 7-15 showed that overweight and obesity did predispose the subjects to bad posture: abnormal spine curvature was found in 30.8% of overweight/obese girls.

Correlation between correct BMI, physical activity and healthy behaviors were proved by Nowak (2011), who studied 1,361 women aged 20-75 (including students). Nowak (2011) reported positive correlations between physical activity, non-smoking and regular dental check-ups. Main recommended lifestyle changes are: increased physical activity and proper nutrition.

This study revealed low physical activity of students - only 65% were physically active, while 34.6% did not participate in any form of physical exercise. Only 37% of students declared working out for longer than 30 minutes.



It confirms a steady decrease of physical activity among adults Poles, who exhibit low physical activity and prefer passive forms of leisure (GUS 2006). According to the final report of AHA (American Heart Association) published in 2009, over 75% of subjects aged 18+ reported not working out as recommended by AHA, while 10% of subjects did not engage in any form of physical activity (*EU Physical Activity Guidelines* 2008).

Are Polish students prepared to become a symbol of healthy lifestyle in the future? Current studies seem to suggest a negative answer to this question.

Results presented in this paper of author's own research conducted among Tourism and

Leisure students (program provided by two departments of University of Szczecin) showed that only 13.4% of subjects assessed their fitness level as 'high', while over 44% considered it 'low'. More optimistic results were presented by Niżnikowska's team (2014), who analyzed actual fitness of 450 students of selected departments (IT Studies, Tourism and Recreation, Nursery, Emergency Medical Service, Public Health) in Biała Podlaska, Poland. Authors concluded that half of subjects (57.9%) engaged in moderate physical activity, 30% in high-intensity physical activity and 12.4% in low-intensity physical activity. The study was carried out with the help of International Physical Activity Questionnaire IPAQ (short version) among undergraduate and graduate students.

This worrying situation may be caused by the following tendency: children, adolescents and adults tend to choose passive forms of leisure, such as watching TV, using computers, listening to music, reading and other activities which don't require any exercise.

In this study, 86.6% of students declared using computers in their free time (games, movies, the Internet); 66.6% watched TV and movies on DVDs, while 21.8% of subjects spent their free time in an entirely inactive way. In 2005, a similar research was conducted by Danilenko et al. (2006) among 200 students from Brześć, Poland, aged 17-24. The research revealed that students from Brześć preferred meeting friends (51%) and watching TV (49%) in their free time. Research carried out by Kulesza (2006) among 200 students of Tourism, Leisure and Physical Education revealed that the subjects tended to spend their time actively (53%), compared to 23% of students who preferred passive leisure.

The most common obstacles to physical activity reported by the subjects in this study were: lack of free time (45%), lack of motivation and strong will power (45%), lack of willingness and laziness (40%), lack of money (26%) more time spent on passive leisure (20%) and reduced access to equipment and facilities (13%). Similar declarations had been obtained in previous analyses. In research conducted by Borek's team (2008) among Physical Education and Physiotherapy students at Opole University of Technology, the subjects reported the following obstacles to physical activity: lack of free time (42%) and lack of willingness (45%). Research carried out by Lipek et al.'s team (2015) revealed that 55% of Medicine students felt they had no time for physical activity, 19% reported lack of motivation for exercise and long distance to sports facilities. Lack of time and motivation were also selected by subjects in research by Markiewicz-Górka et al. (2011), Mędreła-Kuder (2011), Nizioł (2008) and Sochocka and Wojtyłko (2013).

Different conclusions were reached in research by Lisowska and Rysz (2006). While studying this issue among students from Legnica, Poland, they found that subjects listed bad condition of facilities and high prices of services as the most common obstacles to physical activity.

The analysis of author's own research on nutrition routine of students revealed repeated bad habits. These include: incorrect nutrition model – irregular meals (72%), eating at night (51.7%); imbalanced diet – excessive consumption of fats, especially saturated fats (53.3%), insufficient consumption of fish (21.7%) milk and dairy products (63.3%), insufficient fiber intake, including fiber from vegetables (65%) and fruit (58.3%).

Smoking habits of subject were also worrying. Over 21% of students smoked, and 69% of them were regular smokers. This is similar to percentage of smokers in the adult population of Poles (30.3% of smokers according to GUS in 2006). Borek et al. (2008) found in their research that 48% of Physical Education students and 30% of Physiotherapy students smoked.

Research of Poręba et al. (2008) carried out among 240 students of Natural Sciences at four major universities of Wrocław revealed that 23.9% of subjects smoked. According to Sygit's research (2011), as many as 47% of adolescents aged 12-17 were faced with the problem of smoking, and according to Woynarowska and Mazur (2003), this issue increased with age. Therefore, public awareness should be raised in relation to the problem of smoking, and fighting with this addiction should be treated as a key issue in cardiovascular disease prevention (Poręba et al. 2008).

Prevalence of alcohol consumption among students is a worrying phenomenon. None of the subjects reported being a teetotaler. 33.3% of subjects consumed alcohol a number of times per month, 26.6% once a week, and 6.6% a number of times per week. Research carried out by GUS [Central Statistical Office in Poland] (2006) revealed that 20.5% of adult Poles (aged 15+) drank alcohol 1-6 times per week. Research by M.A. Nowak and L.Nowak (2013) among a large group of women (n=1,361) revealed that women who did recreational exercise for over 7 years chose active forms of leisure and consumed low-alcohol drinks.

While analyzing risk behaviors of students, drug use was taken into account. 8,3% of students admitted using drugs.

Another health behavior which was analyzed was the amount of sleep. In this research, students reported 6-7 hours of sleep on work/school days (75%). Worryingly, 2% slept for only 2-3 hours.

While analyzing differences between sub-groups (according to students' specialization), it was found that Tourism Business students displayed more unhealthy lifestyle than the students of Health Aspects of Tourism and Leisure. The following statistically significant differences were revealed: vegetable consumption: (WZiEU: 56.7%; WKFiPZ: 73.3%), fruit consumption (WZiEU: 43.3%; WKFiPZ: 73.3%), milk consumption (WZiEU: 53.3%; WKFiPZ: 73.3%); limited consumption of processed food (WZiEU: 13.3%; WKFiPZ: 53.3%); drug use (WZiEU: 13.3%; WKFiPZ: 3.3%). There was also a statistically significant difference in terms of fish consumption (WZiEU: 33.3%; WKFiPZ: 10.2%).

There were, however, no statistically significant differences in terms of: physical activity, smoking tobacco, alcohol consumption, amount of sleep. Students who participated in the research had unhealthy lifestyle which may become a risk factor in the future, leading to diseases of affluence; it may directly impact health of adult population of Poles in the future. Nowak (2013, p. 6) considered young people's models of physical culture, including students, as well as evaluation and the choice of the value of the body: 'What changes in the patterns of physical culture can we expect in the future?' It is also a question about the effects of the shaping of health-oriented choices in youth, adults and the elderly.

According to the quoted author: 'Sports education is necessary for the positive development of the body and other sides of human personality at the same time. Participation in broadly understood sport is not only a form of autotelic behavior, but also instrumental behavior, which must be interpreted both in terms of freedom of choice and obligation.'

## Conclusions

Students' lifestyle is dominated by unhealthy behaviors, such as insufficient physical exercise, passive leisure, smoking cigarettes and drinking alcohol.

It was revealed that lifestyle of Tourism Business students was more unhealthy than lifestyle of Health Aspect of Tourism and Leisure students in terms of the following behaviors: consumption of vegetables, fruit milk and dairy products, reduced consumption of sweets, sugar, and processed food, as well as drug use.

These unhealthy behaviors may lead to diseases of affluence in their future lives.

Therefore, it is necessary to include pro-health education in their curricula; consideration should also be given to target and actual effects of education at Polish universities which offer Economy-related studies.

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