



COMPARISON OF SELECTED DOMAINS OF QUALITY LIFESTYLE BETWEEN INDIANS AND INDIAN CANADIANS

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Article DOI: <https://doi.org/10.36713/epra4983>

ABSTRACT

The quality of various domains in life leads to life satisfaction which is essential for a balanced existence. From the perspective of physical and mental health, family, education, employment, wealth, safety & security to freedom, religious beliefs and the environment –all entities of a human life are involved to it. Attempt has been made to consider three major aspects of a quality life namely, mindful eating, physical activity and sleep hygiene to denote the status of behavioural habits of people living in India and Canada. 373 subjects, 234 from India and 139 from Canada, were selected conveniently for this study. It is observed that Canadian community is significantly superior in habits of mindful eating and physical activities in comparison to Indian subjects. However, no significant difference was found in sleep hygiene between the subjects living in India and Canada.

KEY WORDS: *Mindful eating, Physical Activity, Sleep Hygiene*

INTRODUCTION

The quality of life is a multidimensional concept that defines a standard level for emotional, physical, mental, social and spiritual wellbeing. It is associated with the goals, expectations, standards, and concerns of each individual living in different cultural systems (WHO, 1993) to lead a good life. Lifestyle is a key factor to enhance the quality of life. Thus, the quality of various components in life including physical, mental and spiritual health, family, education, employment, wealth, safety & security, freedom, beliefs and the environment all encompass the quality of life. Physical activity is a behaviour that is bodily movement produced by contraction of skeletal muscles that require energy

expenditure (ACSM, 2010) while sleep hygiene is vital for stress management. The quality of life, as a new health indicator, is not worried about how long people can live, but more concerned about how well they live. It is the exactness of negative and positive features of life.

Research shows that developing countries are at high risk of chronic diseases due to lifestyle habits. In a study, Jepson, R., et al (2012) indicated a twofold increased heart disease and fivefold increased risk of diabetes of South Asian people. With this background to focus on regular exercise, adequate sleep, and balanced demand of work and relaxation and over all positive health lifestyle habits for well-being of Indian-origin people, this study was undertaken.

**Objectives**

The objectives of the study were to

- i) assess the status of quality lifestyle of Indians and Indian Canadians
- ii) compare quality of lifestyle between Indians living in India and Indian Canadians living in Canada

METHODOLOGY

Subjects: 373 people served as subjects for this study, out of which 234 (Male=128, Female=106) were selected from India and 139 (Male = 67, Female=72) from Canada. The age group of the subjects ranged between 30 and 60 years.

Inclusion and Exclusion criteria: Two mixed groups of male and female subjects from two different countries were involved in the study. As the study deals with behavioural patterns and habits of the citizens, sex differentiation or age category were not considered separately.

Location: The data were collected using standard questionnaires from the states of Punjab and West Bengal in India and British Columbia in Canada.

Design: The sampling technique was convenient group design and two-group comparison method was adapted to the study.

Ethics: The process of approval of the study was initiated systematically to meet the requirements of regulated protocol and guidelines of the prestigious university of Visva-Bharati, India.

Criterion Measures: To achieve the objectives of the study, quality of life style was considered as the parameter, while three different variables such as Mindful Eating Habits, Physical Activities and Sleep Hygiene designated it. Mindful Eating Habit was characterised by five domains such as Awareness, Distraction, Dis-inhibition, Emotional Responses and External Cues. It was assessed by standardized 'Mindful Eating Questionnaire' with standard scoring tool, Physical Activity was assessed by International Physical Activity Questionnaire and the Sleep Hygiene was assessed by the Epworth Sleepiness Scale with standard scoring tools.

Statistical Procedure: To assess the status of two groups on lifestyle and compare between the groups on selected variables, the data were analysed by descriptive statistics and Independent 't' test was computed using Microsoft excel and SPSS Software version 25. The level of significance was set at 0.05.

FINDINGS & INTERPRETATION

The descriptive statistics of all the selected variables are presented in Table 1.

Variables	Domains	Country Group	N	Mean	±SD	±SEM	
Mindful Eating Habits (Score)	Awareness	India	234	2.24	0.46	0.03	
		Canada	139	2.35	0.46	0.04	
	Distraction	India	234	2.84	0.44	0.03	
		Canada	139	2.91	0.46	0.04	
	Dis-inhibition	India	234	2.69	0.39	0.03	
		Canada	139	2.80	0.33	0.03	
	Emotional Response	India	234	2.01	0.50	0.03	
		Canada	139	2.15	0.53	0.04	
	External cue	India	234	2.08	0.53	0.03	
		Canada	139	2.16	0.51	0.04	
	Mindful Eating Habits (composite score)		India	234	2.37	0.23	0.02
			Canada	139	2.47	0.21	0.02
Physical Activities (MET-hr/day)		India	234	16.25	19.63	1.28	
		Canada	139	26.80	69.21	5.87	
Sleep Hygiene (hrs/day)		India	234	8.64	4.54	0.30	
		Canada	139	7.82	4.31	0.37	

Abbreviation: SD = Standard Deviation, SEM = Standard Error of Mean

The graphical representation of Mindful Eating Habit, Physical Activity, Sleep Hygiene and five domains of Mindful Eating Habits between

subjects living India and Canada was presented in Figure 1, Figure 2, Figure 3 and Figure 4 respectively.

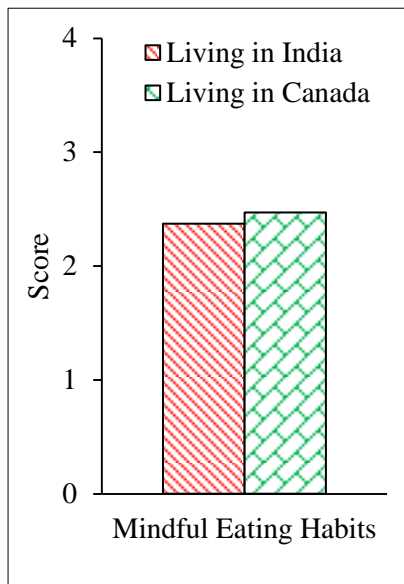


Figure 1: Graphical Representation of Mindful Eating Habit

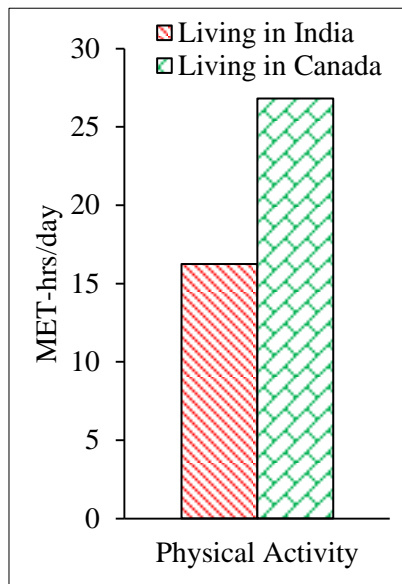


Figure 2: Graphical Representation of Physical Activity

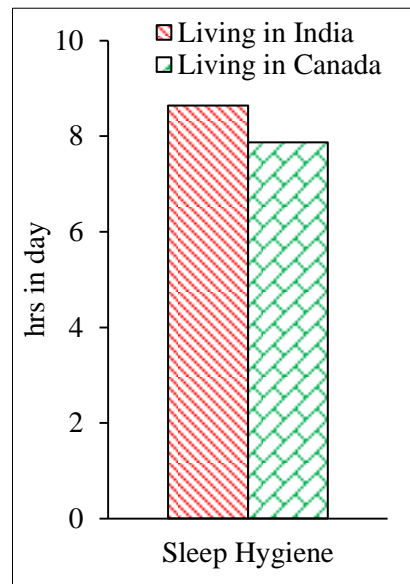


Figure 3: Graphical Representation of Sleep Hygiene

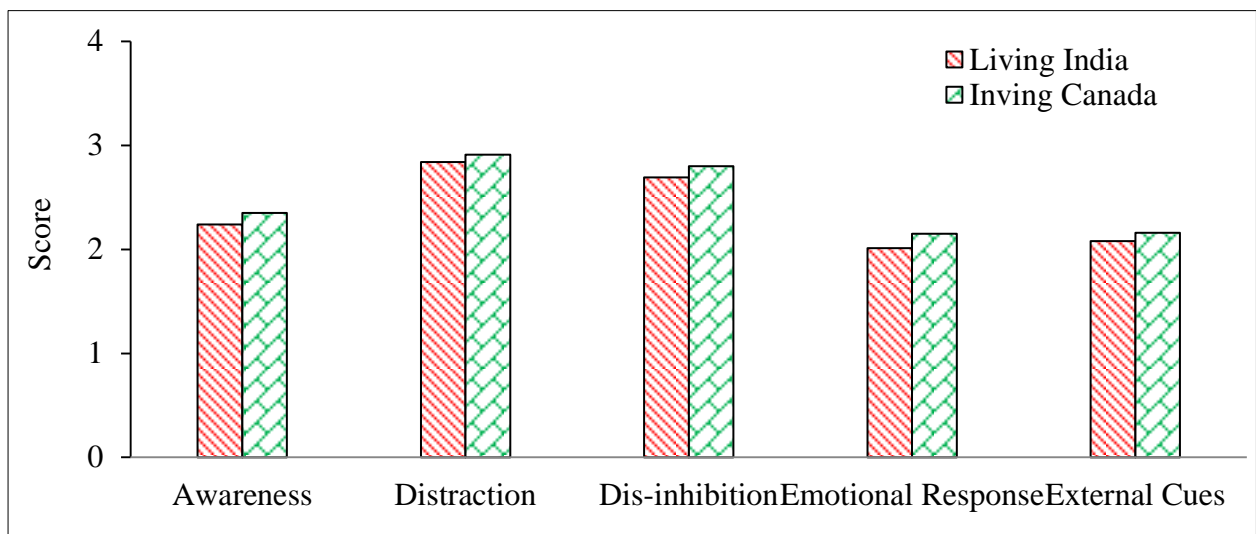


Figure 4: Graphical Representation of Five Domains of Mindful Eating Habit



Variables	Domains	Country	Mean Difference	Std. Error Difference	t-ratio	Sig. Level (2-tailed)
Mindful Eating Habits(score)	Awareness (Higher score better)	India	0.11	0.05	2.24*	0.026
		Canada				
	Distraction (Reversed score)	India	0.07	0.05	1.49	0.138
		Canada				
	Dis-inhibition (Reversed score)	India	0.11	0.04	2.88*	0.004
		Canada				
	Emotional Response (Reversed score)	India	0.14	0.05	2.49*	0.013
		Canada				
	External Cue (Reverse d score)	India	0.08	0.06	1.39	0.165
		Canada				
Mindful Eating Habits (composite score)	India	4.23	0.02	4.23*	0.000 (2.95x10 ⁻⁵)	
	Canada					
Physical Activities (MET-hrs/day)	India	2.19	4.82	2.19*	0.029	
	Canada					
Sleep Hygiene (hrs/day)	India	0.82	0.48	1.71	0.088	
	Canada					

*. Significant at 0.05 level

Table 2 indicates that significant difference exists between the Indian and Canadian people in lifestyle so far as Mindful Eating Habits and Physical Activities are concerned. Subjects belonging to Canada were more aware, less inhibited and fairly emotional about mindful eating and they had significantly better Mindful Eating Habits in comparison to subjects living in India. Besides, the subjects living in Canada were found leading more physically active lifestyle in comparison to subjects living in India. However, no significant difference was found in sleep hygiene between subjects living in Canada and India.

The result might be due to the fact that the Government of developed countries like Canada provides ample health services to every citizen at par with their Health Policy, while over-populated India and its health policy failed to do so. In domains of Mindful eating habits like awareness, dis-inhibition, emotional response, Canadians were found superior to the Indians. Further, the reason for Canadian subjects to have better physical activity habits might be due to awareness and opportunity of physical activity followed by their mind-set.

Cho J., et al. (2019) suggested in their research that subjective health acts as a moderator in between psychological well-being and existing objective health of participants' experiences. Hall W., et al (2018) in their research revealed that sleep quality may be enhanced and behavioural eating habits may be improved through advice and diet controlling sugar.

CONCLUSION

On the basis of results of this study, it may be concluded that

- i) In Mindful eating habits targeted population of Indian Canadians are significantly superior to their counterparts living in India. Their awareness, dis-inhibition and emotional responses were significantly better than Indians.
- ii) In Physical Activity habits, Canadian subjects showed significant supremacy.
- iii) However, in sleep hygiene score, subjects of both the countries are found balanced.
- iv) Thus, it might be assessed that Indian-Canadians living in Canada have better life style as compared to subjects living in India.

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