

The Level of Healthy Behaviour among Athletes and Non-Athlete Students at Yarmouk University: A comparison

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This research aims to identify the level of healthy behaviour among athletes and non-athlete students at Yarmouk University, Jordan. The sample consisted of (196) students who were chosen purposefully. The descriptive approach was used, and a questionnaire was the main instrument for data collection. The results showed that the level of healthy behaviour among student athletes was (high) while the level of healthy behaviour among non-athlete students was (moderate). The study also showed statistically significant differences in the level of healthy behaviour among athletes and non-athlete students, in favour of student athletes. In the light of the results, the researcher recommends increasing the number of courses that address health and health behaviour issues, and emphasising the positive role of sports activities in developing and improving healthy behaviour.

Key words: *Healthy behaviour, sports activities, exercise.*

Introduction

Practising sports is an important aspect of the educational process. It has become a modern requirement and an important cultural aspect in society. Physical activity has a significant and integrational role in the educational system that is hard to ignore, because of its role in improving individuals' skills and capabilities in various fields especially motor skills, and mental and psychological health. That is in addition to the social interaction involved.

Sport is tightly coupled to health education, since maintaining one's health is the primary goal that one seeks to achieve and maintain during the different stages of life. When one

remains healthy, one can attain a comprehensive growth at all levels of physical, psychological and social health.

Health occupies a significant place in the goals that education seeks to achieve. Health education begins from early childhood and continues into old age. During these stages and educational methods, the necessary information and skills about healthy growth are obtained in a way that assists healthy growth, positive results, and the formation of a healthy, distinguished generation (Ameen, 2016).

Among university students, sports vary. Some students practice daily, some do it irregularly and some do not practice sports at all. Practising sport affects students' personalities. Various studies have shown that students who practice sports acquire many positive trends towards learning, interact with others more easily, and maintain a level of physical fitness.

Brahimi, Salhawi, and Zaidan (2016) stressed that practising healthy behaviour enables students to be healthier, and to be more able to develop healthy and nutritional aspects that assist them to maintain an appropriate level of health.

Babatunde (2017) explained that Health Science contributes to identifying both sound and dangerous behaviour patterns, and the reasons behind disorders that afflict individuals. It also contributes to qualifying individuals, improving health systems, and analysing the effects of the negative behavioural patterns which affect their health behaviour, and reflect on their life and academic performance.

According to Smadi (2011), healthy behaviour refers to behaviours that an individual practices to maintain an appropriate level of health, in accordance with the theory of choice and theories of system. General, individual health is an integration of all the individual's physical, mental, emotional, and motor aspects. Student health is achieved through the fullest integration of all body systems functioning together in harmony.

The importance of practising healthy behaviour for athletes is that they originally engage in beneficial activities and develop themselves in their free time. By engaging in sport they integrate the growth of their psychological, physical, and social aspects. That is in addition to raising their bodies' efficiency, such as their nervous, muscular, and respiratory systems.

Healthy behaviour is achieved properly by ensuring the safety of sports activities, and by providing awareness about health information related to those activities. On the other hand, they raise awareness about negative practices and their impact on a person's body, through working to avoid and prevent negative practices, to instead achieve the intended goals of sports (Mustafa et al., 2014).

Schneider and Schneider (2012) pointed to a set of healthy behavioural patterns which constitute exercise, that increases bodily efficiency, reaches ideal weight, and reduces blood cholesterol. Exercise can also strengthen muscles and increase joint flexibility. Nutrition is another healthy behaviour that one should obtain by a nutritious and a balanced diet, and avoiding harmful food that contains preservatives. Self-care consists in using personal tools, maintaining personal hygiene, visiting a doctor in case of any physical fatigue, and keeping the body from injuries and accidents. Healthy sleep patterns contribute to maintaining a healthy body and mind, through sleeping between 7-8 hours per day for example.

‘Student athletes’ refers to the students who practice sports, and do physical activities and various sports regularly and daily. They thereby acquire skills, healthy habits, and appropriate behaviours that enable them to fulfil their needs in their society. Non-athlete students do not practice any kind of sports, even occasionally (Bothmer & Fridlund, 2005).

Several studies indicate that student athletes have high capabilities for socially effective communication with other members of society. They can control their emotions and manage their time appropriately. In addition, they are characterised by psychological and moral balance (Abbas and Karim, 2013).

Peltzer & Pengpid (2015) indicate that student athletes are more able to focus, perceive variables, and distinguish relationships between them. Also, those students are more open and have a higher ability to activate their nervous and muscular systems than others, which qualifies them to better respond to change, in comparison with non-athlete students. Student athletes are more self-confident, challengers, and can overcome and learn easily from the different situations that facing them in their lives.

The Study Problem

Healthy behaviour is one of the most important cumulative achievements of an individual, by exercising behaviours that aim to maintain and enhance one’s mental and physical health. Practising healthy behaviours and beliefs protects the individual from many diseases and major health problems. Therefore, maintaining health is a personal responsibility. An individual must do one’s best to avoid unhealthy behaviours and habits, to maintain one’s health.

Concerning athlete students, adopting healthy behavioural patterns help them achieve a level of safety when performing sporting activities, and when selecting a suitable warm-up for exercise, type of clothing, or appropriate athletic shoe for each sporting activity. Student athletes check-up periodically to ensure their wellbeing.

In addition to the above distinguishing student athletes from others, they are ambitious people who strive to achieve the best. By practising sports, they enhance their ability to recognise what they want, make correct decisions, and realise their duties and responsibilities; characteristics which are usually reflected in their performance (Grygiel-Go'zniak et al., 2016).

Through daily observations, the researcher noticed some differences in the behaviour of athlete and non-athlete students. Therefore, she decided to identify the differences in their healthy behaviour.

Hence, this study came to identify healthy behaviour among athlete and non-athlete students at Yarmouk University, Jordan. Also, this study identifies the role and importance of sports activities, their positive impact on the individuals who follow healthy lifestyles, and how it reflects positively on their life in general. The researcher also decided to study the differences between students who practice sports and those who do not, to identify the level of differences, with the aim of spotlighting the importance of practising healthy activities.

Research Questions

- 1- What is the level of healthy behaviour among athlete and non-athlete students at Yarmouk University?
- 2- Are there any statistically significant differences in the level of healthy behaviour among athlete and non-athlete students at Yarmouk University?

Research Objective

The research aims to:

- 1 -Identify the level of healthy behaviour among athlete and non-athlete students at Yarmouk University.
- 2- Identify the differences in the level of healthy behaviour among athlete and non-athlete students at Yarmouk University.

Research Limitation

- 1 -Spatial limitation: Yarmouk University
- 2 -Objective limitation: The study instrument used by the researcher (the questionnaire).
- 3 -Time limits: the second semester of the academic year 2018-2019.
- 4- Human limitations: Yarmouk University students, second semester of the academic year 2018-2019.

Procedural Definitions

Student athletes: athletes and players of sports teams at Yarmouk University

Previous Studies

Khaweldi et al. (2018) aimed to identify the level of health awareness among resident university students who practise sport and who do not, at a University. The descriptive approach was used. The study sample consisted of (280 male students) and a special questionnaire was applied in the areas of health awareness. The results showed that the health awareness among students who practice sport were (high). The health awareness among students not practising sports activities was (moderate). The results also showed statistically significant differences in health awareness areas between resident male students who practice sport, and those who do not, in favour of the former.

Qabajeh et al. (2018) studied health behaviour among students of scientific colleges at Al-Quds University. The study sample consisted of (360) randomly selected students. The researcher used the Samadi scale 2011 for health behaviour. The results indicated that the health behaviour among students was (moderate), and differences in the level of healthy behaviour attributed to the gender variable, in favour of males. The study also indicated no statistically significant differences attributable to the variable of academic levels and cumulative averages.

Bin Zaidan and others (2017) aimed to determine health awareness among physically disabled players and non-players of sports activity. A descriptive approach was used. The study sample consisted of (100) physically disabled people, including (50) disabled players and (50) disabled person who are non-players. A measure of health awareness was used. The disabled players had a higher health awareness compared to non-players.

Brahimi, Salhawi, and Zidane (2016) conducted a study in Algeria. It aimed at identifying awareness of healthy behaviour among school students practising and not practising sports in physical education classes. The sample consisted of (90) male and female students from secondary schools, practising and not practising sports in physical education classes. A questionnaire was used. The study revealed statistically significant differences in the level of awareness of healthy behaviour among school students, attributable to the students who practice sport in physical education classes.

Mahmoud (2016) identified the health beliefs of athletes and their relationship to health behaviour. The study sample consisted of (164) players. The researcher used the descriptive approach, employing a health beliefs questionnaire and a health behaviour questionnaire. The

results indicated both that the study sample had a high level of positive health beliefs, and a positive relationship between healthy beliefs and healthy behaviour.

Grygiel-Go´rniak et al. (2016) conducted a study in Poland. It aimed at identifying the level of healthy behaviour of medical school students and its effect on the exercise of their sports. The sample consisted of (151) students of the Faculty of Medicine. It used a questionnaire. The results indicated that the level of university students who do sports activities was high. Further, there was a positive relationship between the healthy behaviour of university students and their sports practices. The results showed differences between exercising healthy nutrition due to the gender variable, in favour of females.

Smadi (2013) aimed to determine the value system among Yarmouk University students, and to examine the effects of gender, college type, economic income, their fathers' education and students' study level. The sample consisted of (955) randomly selected students. The researcher used the health behaviour scale he prepared. Health behaviour was (moderate). There were statistically significant differences attributable to gender in favour of females, and to the fathers' education. The latter were in favour of a diploma or a BA and a masters' degree or more, compared to those whose parents' education level was Tawjih or less.

Naeem (2013) identified the reality of behavioural patterns among players in the Jordanian national team. It also aimed to identify patterns of healthy behaviour according to the gender variable. The sample consisted of (104) players from the national team. A questionnaire was used. The degree of healthy behaviour of the national players was (high). The results also indicated no statistically significant differences, in the degree of healthy behaviour by the national team players, due to the gender variable.

Abdel-Haq et al. (2012) studied 'The level of health awareness among students of An-Najah National University and Al-Quds University'. The study aimed to identify the level of health awareness among students of An-Najah National University and Al-Quds University, and to identify the differences in levels of health awareness, according to several variables. The researchers used the descriptive analytical method on a sample of (800) students from Al-Quds and Al-Najah University. A questionnaire related to health awareness. Health awareness was found to be (moderate) among the sample. Considering the results, the researcher recommended workshops on developing health awareness in relevant courses such as sports, health and health education.

Qaddoumi (2005) identified health awareness, sources of health information for Arab volleyball players, and differences in health awareness, according to the variables of playing experience and the educational qualification. The study sample consisted of (90) players from the twenty-second Arab Clubs Championship in Jordan. The researcher used the health

awareness scale and sources of health information as a basic means for collecting information. The results indicated that the level of health awareness among the sample members was (high).

Comment on Previous Studies

The researcher relied on previous studies to choose the title of the current research, and to identify the variables and topics that constitute the focus of the research, namely: healthy behaviour and the practice of sports activities. It is noteworthy that previous studies dealt with a set of information and knowledge related to health behaviour among university students, such as the study of Qabajeh (2018) and Grygiel-Go'zniak (2016) and Smadi (2013). Health awareness was also studied by Khaweldi (2018), Abdel-Haq et al. (2012).

Some studies dealt with healthy behaviour and health awareness among athletes and people who practice sports activities, such as that of Ben Zaidan (2017) and Brahimi and Salhawi (2016), Naeem (2013) and Qaddoumi (2005). The studies vary in the degree of content and form. But all formed an important reference for the researcher in terms of the information and ideas they contained. The researcher did not find that any studies addressed differences in the level of healthy behaviour, between athletes and non-athlete students. Hence, this study is distinguished. It measures differences in healthy behaviour between athlete and non-athlete students.

Study Methodology

To achieve the aims of the study and to answer its questions, the survey method was used to collect data through distributing, collecting and analysing questionnaires statistically by appropriate methods.

Study Population: The study population consists of all students at Yarmouk University.

The Study Sample: The study sample was chosen purposefully, representing the study population, during the academic year (2018-2019). The study sample was purposefully chosen among a group of athlete students and a group of non-athlete students. In total (220) questionnaires were distributed and (196) were returned.

Table (1) shows the distribution of the study sample according to the independent variable.

Table 1: Distribution of the members of the study sample

Level/ category	No.	percent
Athletes	95	48.5
Non-athletes	101	51.5
Total	196	100.0

The Instrument of the Study

For the purposes of implementing the instrument, reference was made to educational literature and previous studies related to the level of healthy behaviour among students, both athletes and non-athletes at Yarmouk University, such as Smadi (2011). The researcher adopted the health awareness scale and re-applied it to Yarmouk University students. The study instrument consisted of (45) items. The respondent put a tick next to each item on a scale of five points (very high, high, moderate, low, and very low) - Appendix No. (1). The instrument was corrected by giving the following weights (1, 2, 3, 4, 5) for the aforementioned degrees. The validity and reliability of the instrument were confirmed.

Validity of Study Instrument

A. Face Validity: The validity of the study instrument was confirmed by presenting it to (5) arbitrators with expertise and specialisation in Jordanian universities. Their notice and modifications were considered in terms of:

1. Language.
2. Item appropriateness as to the area in which it was included.
3. The suitability of the items and their compatibility with the field of study.
4. Make any modifications they deem appropriate.

Based on the consensus of more than (80%) of the group of arbitrators, the study instrument was finally approved. It consisted of (45) items.

B. Construct Validity (content): The questionnaire was applied to a survey sample of (40) male and female students from the study population, and they were excluded from the study sample. Correlation coefficients were calculated between the score of each item, with the total score as shown in Table (2).

Table 2: Pearson correlation coefficients between the instrument and the overall instrument

No.	correlation coefficients	No.	correlation coefficients
1	.944**	24	.806**
2	.924**	25	.837**
3	.907**	26	.840**
4	.944**	27	.697**
5	.954**	28	.823**
6	.853**	29	.735**
7	.666**	30	.747**
8	.636**	31	.608**
9	.525**	32	.747**
10	.808**	33	.684**
11	.730**	34	.739**
12	.603**	35	.750**
13	.613**	36	.608**
14	.729**	37	.747**
15	.523**	38	.769**
16	.471**	39	.608**
17	.697**	40	.747**
18	.701**	41	.624**
19	.741**	42	.624**
20	.766**	43	.634**
21	.701**	44	.715**
22	.731**	45	.766**
23	.738**		

*Statistically significant at the level of significance (0.05)

** Statistically significant at the level of significance (0.01)

Table (2) shows that the values of the coefficients of correlation of the areas of the study instrument with the instrument, overall, were higher than (0.30). It is suitable for the purposes of achieving the current study objectives.

The Reliability of the Study Instrument

Two methods were used to verify the reliability of the study instrument. The first was the test/re-test. The second was the calculation of the Cronbach coefficient for the questionnaire items. In the first method, the questionnaire was applied to the survey sample of (40 male and female students) . The second was applied after two weeks. A Pearson correlation coefficient (reliability coefficient) was used to calculate the difference between the two applications.

In the second method, the internal consistency coefficient was calculated by the Cronbach alpha coefficient. The results indicated that the Pearson correlation coefficient between the examinees' scores on the instrument, at the two application and the overall reliability coefficient of the instrument, was (0.962). The internal consistency coefficient (Cronbach's Alpha) for the instrument as the overall was (0.986). It is noted that it has a high reliability coefficient. Accordingly, these values were considered appropriate for the purposes of this study, achieving its purpose, and confirming its results.

The Results of the Study

The Results of the First Question: 'What is the level of healthy behaviour among athlete and non-athlete students at Yarmouk University?'

To answer this question, the mean and standard deviations were calculated for the estimates of the members of the study sample, on the items of the degree of health behaviour level as an overall as shown in Table (3).

Table 3: The means and standard deviations for the estimates of the members of the study sample on the items of the tool of the healthy behaviour level, arranged in descending order.

Items	Athletes			Non-athletes			Total	
	means	SD	degree	means	SD	degree	means	SD
I maintain a degree of body ratio between my weight and height	4.14	.807	high	2.87	1.197	moderate	3.48	1.205
I do sports such as running, football, etc.	4.06	.755	high	2.91	1.266	moderate	3.47	1.196
I feel self-satisfied	4.04	.743	high	2.86	1.241	moderate	3.43	1.186
I have the full acceptance of all my family	4.03	.750	high	2.89	1.199	moderate	3.44	1.156
I set realistic goals so that I can implement them	4.02	.812	high	2.99	1.127	moderate	3.49	1.112
I drink too much pure water	4.01	.737	high	3.17	1.049	moderate	3.58	1.002
I sleep enough time	4.01	.779	high	2.80	1.208	moderate	3.39	1.187
I have a stable emotional life	4.01	.765	high	3.23	.989	moderate	3.61	.968
I collect the necessary information before making any decision	4.00	.668	high	3.21	1.177	moderate	3.59	1.041

I have full confidence in my ability to make judgments	3.99	.692	high	3.25	1.072	moderate	3.61	.979
When I choose animal protein I eat white meat and fish	3.99	.707	high	3.39	.979	moderate	3.68	.908
I avoid getting medication from people who are not qualified to prescribe it	3.98	.668	high	3.29	1.080	moderate	3.62	.966
I can understand other people's feelings and opinions	3.97	.818	high	2.90	1.153	moderate	3.42	1.136
I practice walking regularly	3.96	.667	high	3.26	1.101	moderate	3.60	.980
I take the necessary measures when I suffer from any pain	3.96	.728	high	3.02	1.183	moderate	3.47	1.093
I treat people the way I like to be treated	3.96	.798	high	2.94	1.240	moderate	3.43	1.164
I avoid mixing medications without doctor's supervision	3.95	.720	high	3.04	1.148	moderate	3.48	1.064
I focus on my diet on a very small percentage of salts	3.94	.633	high	3.47	.975	moderate	3.69	.858
I avoid using others' personal tools or items	3.94	.649	high	3.32	1.067	moderate	3.62	.940
My life has an acceptable degree of excitement, activity and fun	3.94	.836	high	2.90	1.212	moderate	3.40	1.166
I use medications only when necessary	3.93	.718	high	2.87	1.246	moderate	3.38	1.151
I eat more fresh vegetables and fruits	3.92	.710	high	3.05	1.195	moderate	3.47	1.078
I maintain regular clinical medical examination (every year)	3.92	.808	high	3.08	1.074	moderate	3.48	1.040
I visit the dentist periodically to ensure the safety of my teeth	3.92	.808	high	2.97	1.135	moderate	3.43	1.095
I clean my teeth after eating meals	3.91	.637	high	3.29	.993	moderate	3.59	.893
I eat breakfast daily	3.89	.610	high	3.43	.963	moderate	3.65	.842
I vary the foods that I eat	3.88	.682	high	3.24	1.133	moderate	3.55	.994

I avoid taking hypnotics	3.88	.634	high	3.34	1.032	moderate	3.60	.903
I maintain a normal level of blood pressure	3.88	.810	high	2.81	1.239	moderate	3.33	1.180
I reduce the intake of foods rich in white sugar	3.87	.688	high	3.29	1.089	moderate	3.57	.961
Take the necessary measures to prevent infectious diseases	3.87	.688	high	3.14	1.123	moderate	3.49	1.005
I am fully aware of all the feelings I live, and I accept them	3.87	.789	high	2.90	1.153	moderate	3.37	1.104
I bear the consequences of all my behaviours	3.87	.703	high	3.18	1.108	moderate	3.52	.995
I am fully aware of the side effects of any medication I take	3.86	.662	high	3.09	1.158	moderate	3.46	1.025
I express my feelings easily to those close to me	3.86	.895	high	2.87	1.262	moderate	3.35	1.204
I avoid using any type of tobacco (cigarettes, shisha)	3.85	.668	high	3.43	.920	moderate	3.63	.834
I reduce foods rich in animal oils and fats	3.82	.699	high	3.21	1.061	moderate	3.51	.953
I avoid taking sedative drugs	3.82	.714	high	3.05	1.169	moderate	3.42	1.047
It is easy for me to be loved by others	3.81	.704	high	2.88	1.177	moderate	3.33	1.080
I observe carefully the instructions included with the medication prescribed by my doctor	3.80	.693	high	3.24	1.041	moderate	3.51	.931
I avoid calorie-rich drinks	3.79	.617	high	3.43	1.023	moderate	3.60	.868
I follow health education programs on TV	3.77	.750	high	3.01	1.170	moderate	3.38	1.057
I make my decisions without feeling anxious or upset	3.76	.695	high	3.21	1.061	moderate	3.47	.942
I contribute to providing social support to anyone in my family	3.73	.706	high	3.00	1.122	moderate	3.35	1.009
I have a good sense of humour	3.69	.670	high	3.31	.997	moderate	3.49	.874
Overall healthy behaviour	3.91	.228	high	3.11	.593	moderate	3.50	.606

The results showed that the overall degree of the items of the level of healthy behaviour for student athletes was (high), while (moderate) for non-athlete students.

The item 'I sustain a degree of proportionality between my weight and height' came at the first place followed by the item 'I practice sports such as running or football and others'. The item 'I feel self-satisfied' came at the third position. The researcher attributes this result to the student athletes' great interest in practising sports, and their interest in appearing with an ideal weight and length. Therefore, these items came at a (high) degree as perceived by the students themselves, while the items for the non-athlete students came at a (moderate) degree. The researcher attributes this result to the fact that this group of students is not interested in sport, as they have interests other than sports.

This result is also attributed to the fact that student athletes also considered sports as a way to enhance their social ties, as sport facilitates their interaction with others more easily than their non-athlete peers. Also, student athletes have more self-confidence and focus, attention, moderation and optimism than non-athlete students. This is confirmed by many items that came in at a (high) degree, as in the item 'I have full confidence in my ability to make judgments', 'I feel self-satisfied', 'I have the full acceptance of all my family members', 'I treat people the way I would like to be treated' and many other items whose results show a high degree of some personality traits of a student practising sports. It was only a (moderate) degree for the non-athlete students.

This result was consistent with the studies of Khaweldi (2018), Mahmoud (2016), Grygiel-Go'rnaiak (2016), Naeem (2013) and Qaddoumi (2005), that the level of awareness and healthy behaviour among athletes is high.

The results of the study also agreed with those of Qabajeh et al. (2018) and Smadi (2013), that the level of health behaviour and awareness among university students in general was at a (moderate) degree.

The Answer to the Second Question: 'Are there any Statistically Significant Differences in the Level of Healthy Behaviour among Athletes and Non-Athletes, Students at Yarmouk University?'

To answer this question, means and standard deviations were calculated. Two-way analysis of variance was used to find statistical differences in the level of healthy behaviour among athlete and non-athlete students at Yarmouk University. The results were as shown in the following table:

Table 4: The means, standard deviations, and two-way analysis of variance for the level of healthy behaviour among athlete and non-athletic students at Yarmouk University

Item	Group	NO.	Mean	T value	P value
Healthy Behaviour Overall	Athletes	95	3.91	12.639	.000
	Non-athletes	101	3.11		

The results showed statistically significant differences for the level of healthy behaviour among athlete and non-athlete students, where the differences came in favour of student athletes, and the mean for all items of the level of healthy behaviour was (high).

The researcher attributes this result to student athletes having more awareness and knowledge about healthy behaviour than others, due to the sports environment in which they live. The athletes are always keen to maintain their physical and health fitness. Generally, doing sports develops the capabilities of the players, satisfies their desires and achieves self-confidence through practising various activities. The results of the current study were consistent with those of (Khaweldi, 2018) Bin Zaidan (2017), Brahimi, Salhawi, and Zidane (2016) and Grygiel-Go'zniak (2016).

Recommendations

- Emphasise the positive role of sports activities in developing and improving healthy behaviour.
- Increase awareness campaigns and spread healthy culture, to help students obtain positive health behaviours.
- Increase the number of academic courses in universities that deal with health and health behaviour issues.
- Increase the attention of various media on the issue of awareness and healthy behaviour.

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