

Marital Status Inequality in Exercise Behavior among Healthcare Workers

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Background:

Factors as determinants of health include income and social status, social support networks, education, employment and working environments, social environments, physical environments, personal health practices and coping skills, healthy child development, biology and genetic endowment, health services, gender, and culture.

Objectives:

The aim of this study was to examine whether there were differences of exercise behavior among healthcare workers in different marital status.

Methods:

A cross-sectional, questionnaire-based survey was conducted among physicians, nurses, and other paramedical staff of a medical center in middle Taiwan. The study took place in November 2007. Data on marital status, exercise behavior and reasons of irregular exercise were collected from 2409 subjects by questionnaire. The data were analyzed by Chi-square test.

Results:

Participants were grouped according to their marital status (single, married, divorced, widow/widower and separation). A statistically highly significant association of regularity of exercise was found with marital status ($P < 0.001$) (Table 1). Reasons of irregular exercise like work burden, without exercise partner and housework burden were significantly associated with marital status ($P < 0.005$). The reason of without exercise partner was 66.7% in single marital status and 31.2% in married status; the reason of housework burden was 12.6% in single marital status and 86.3% in married status. Irregular exercise because of personal health was not significantly associated with marital status (Table 2).

Table1: Exercise behavior correlates with marital status in healthcare workers

exercise	No. of subjects (n=2357)	Marital status					χ^2	P
		single	married	divorced	widow/widower	separation		
Regular	997	447 (44.8%)	522 (52.4%)	16 (1.6%)	10 (1.0%)	2 (0.2%)	21.512	0.000
Irregular	1360	737 (54.2%)	599 (44.0%)	15 (1.1%)	8 (0.6%)	1 (0.1%)		

Table2: Reasons of irregular exercise correlate with marital status in healthcare workers

reason	No. of subjects (n=1360)	Marital status					χ^2	P
		single	married	divorced	widow/widower	separation		
Work burden								
No	290	130 (44.8%)	152 (52.4%)	6 (2.1%)	2 (0.7%)	0 (0%)	15.280	0.004
Yes	1070	607 (56.7%)	447 (41.8%)	9 (0.8%)	6 (0.6%)	1 (0.1%)		
Personal health								
No	1338	727 (54.3%)	588 (43.9%)	14 (1.0%)	8 (0.6%)	1 (0.1%)	3.046	0.550
Yes	22	10 (45.5%)	11 (50.0%)	1 (4.5%)	0 (0%)	0 (0%)		
Without exercise partner								
No	1084	553 (51.0%)	513 (47.3%)	10 (0.9%)	7 (0.6%)	1 (0.1%)	25.129	0.000
Yes	276	184 (66.7%)	86 (31.2%)	5 (1.8%)	1 (0.4%)	0 (0%)		
Housework burden								
No	1090	703 (64.5%)	366 (33.6%)	13 (1.2%)	7 (0.6%)	1 (0.1%)	245.042	0.000
Yes	270	34 (12.6%)	233 (86.3%)	2 (0.7%)	1 (0.4%)	0 (0%)		

Conclusions:

In this study, a significant association of exercise behavior among healthcare workers was found with marital status. Reasons of irregular exercises like work burden, without exercise partner and housework burden were associated with marital status. Other studies are necessary to validate these initial approaches.