THE IMPACT OF EXERCISE (PHYSICAL ACTIVITY) AND HEALTHY LIFESTYLE (EATING) AMONG THE YOUTH: A LITERATURE REVIEW

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Thesis

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Acknowledgement

First is a big vote of gratitude to God for the strength and wisdom to complete this research, to my supervisor’s Hannele Pietiläinen and Seppo Kilpiäinen for the guidance and word of encouragement. To my husband Alvin Njindo Matiba and son Seth Matiba Njindo for the support and perseverance during the process of the research, to my friends and lastly to Lapin amk for the opportunity to finish what I started, thank you.
Abstract

Exercise and healthy eating what are the effects in the youth. The purpose the research is to describe the impact of exercise and healthy eating on the youth’s psychological, mental and social well-being. The aim of the thesis is to shed light on the positive and negative aspects of exercise, healthy eating and the role of the nurse in promoting physical activity and a healthy lifestyle.

The theoretical framework of this thesis is built around the self determination theory and research consisting of exercise, healthy lifestyle and the impact on the youth.

The thesis is done by way of narrative literature review method. Thirty eight articles on exercise and healthy lifestyle are reviewed and analyzed to support the author’s aim.

The research review in this thesis is from reliable databases and e-journals. The result of the literature show engagement in physical activity is recognized as a contributor to a range of positive outcomes in physical and mental health, social well-being and cognitive and academic performances. The literature identifies the fact that people who exercise and eating healthy food have a higher chance of living a healthy lifestyle and less risk of getting diseases like type 2 diabetes, depression, cardiovascular diseases which are associated with lack of physical activity and choice of lifestyle.

Key words: Exercise (physical activity), Healthy lifestyle (eating), Youth
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## Abbreviations

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<th>Description</th>
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<tr>
<td>PA</td>
<td>physical activity</td>
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<tr>
<td>SDT</td>
<td>self determination theory</td>
</tr>
<tr>
<td>WHO</td>
<td>world health organization</td>
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<tr>
<td>CHF</td>
<td>coronary heart failure</td>
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1. Introduction and background

This thesis examines the impact of exercising and a healthy lifestyle among the youth. I have seen many people especially the youth jogging, running or walking alone or with a friend. This made me ask myself how exercise had helped them in their daily routine and if there was relation to healthy eating. Physical activity is one of the most basic human functions and needs which has benefits across the lifespan and according to Gordon-Larsen et al (2007) there is strong evidence that children and adolescents benefit from physical activity through improved: cardio respiratory and muscular fitness, bone health, cardiovascular and metabolic health biomarkers; and there is a growing body of evidence that inactive children are more likely to become inactive adults. Hence, the importance of introducing physical activity at an early age. (Janssen & Leblanc, 2010). Play and recreation are essential in learning motor and social skills and in the development of creativity (Gleave & Cole-Hamilton, 2012).

My research question is; what impact does exercising (physical activity) and healthy eating have among the youth. My research purpose is to find out the positive and negative aspects of exercise (physical activity) and healthy eating and the role of a nurse in promoting physical activity and a healthy lifestyle. The aim is to provide the information to the youth and nurses to empower them.

I have used a narrative literature review methodology to describe the impact of exercise and healthy lifestyle on youth’s physiological, mental and social well-being. I have used the self determination theory to describe the physiological, mental and social well-being. The theory focuses on the process through which a person acquire the motivation for initiating new health related behaviors and maintaining them overtime. The basic assumption of the theory is that individuals by nature and active, interest, curious, self motivated and eager to succeed.
2. Theoretical framework

2.1 Level of youth

The age definition of youth varies from 10-15, 15-24 or 10-35. Different cultural assumptions underpin the definition of youth in particular countries and are often based on the average age for rites of passage, marriage, parenthood, employment or voting. The assumption is that age defines the boundaries of a group which exhibits some homogeneity of attitude. Stephanie Fahey and Fay Gale (2005)

I will use the concept of "youth" to imply a social demographic group identified through and social economic traits determined by age and social position. (employed, unemployed and level of education) There is no unique or clear-cut definition of "youth". The "youth" constitutes of a group of individuals located somewhere between childhood and adulthood, but the notion of "youth" does not lend itself to definition as a life-cycle period in the same way as other groups such as "children" or the elderly might be defined. According to WHO (2010), Youth is a social demographic group identified through age and the distinctive features of the social position of its members, as well as through socio-psychological traits determined by age and social position. As a specific phase, or stage, of the life cycle, youth is biologically universal, but its specific age limits and the social status and socio-psychological features associated with it have their own social historical nature and are dependent on the social structure culture, and laws of socialization inherent in a particular society. In many countries the term "youth", adolescent, teenager, kid and young person are interchanged often meaning the same thing. Furlong. A (2011) but they are occasionally differentiated. Youth also identifies a particular mindset of attitude as in "he is very youthful"

The term adolescent refers to specific age range during a specific age range during a specific developmental period in a person's life, unlike youth which is socially constructed category. Furlong. A (2013). Although linked to biological process of development and aging, youth is also defined as a social position that reflects the meanings different cultures and societies gives to individuals between childhood and adulthood. Youth is the stage of constructing the self – concept of youth is influenced by several variables such as peers, lifestyle, gender and culture. Wing, John Jr (2012)
2.2 Exercise (physical activity)

Physical activity is defined as any bodily movement produced by skeletal muscles that result in energy expenditure beyond resting expenditure. Exercise is a subset of physical activity that is planned, structured, repetitive, and purposeful in the sense that improvement or maintenance of physical fitness is the objective (Exercise and physical fitness, 2009; Exercise for children, 2009; WHO, 2010). Exercising is the physical exertion of the body making it to physical activity which results in a healthy or healthier level of physical fitness both mental and physical health. Exercise physiology is a sub-discipline of kinesiology that addresses the short term biological responses to the stress of physical activity and how the body adopts to repeated bouts of physical activity over time. In this study, by exercise I mean the combination of physical exertion of the body and dieting with the aim of promoting a higher level of physical fitness, mental health and health in general. Dieting refers to the combination of physical exercise and eating a variety of foods that give one nutrients needed for energetic and healthy lifestyle. Dieting is often used in combination with physical exercise to lose weight, commonly in those who are overweight or obese. Healthy eating means, eating a variety of foods that give you the nutrients you need to maintain your health, feel good and have energy. The nutrients include protein, carbohydrates, fat, water, vitamins and minerals.

2.3 Healthy lifestyle

The concept of health and healthy lifestyle here does not only imply mere absence of disease or infirmity by a state of complete physical, mental and social wellbeing. According to Physical activity guidelines for Americans (2008) and WHO (2010), it is a concept emphasizing the eight aspects of wellbeing into one’s life namely: emotional; environmental; financial; intellectual; occupational; physical; social; and spiritual. Following this broad definition, I use health and healthy lifestyle to encompass personal; psychological; social; and physical capabilities and as a state of complete physical, mental and social well being and not merely the absence of disease or infirmity. Health is a resource for everyday life, not the object of living, and is a positive concept emphasizing social and personal recourses as well as physical capabilities. Health is a fundamental human right, essential for personal development and an essential component of development, vital to a nation’s economic growth and internal stability (WHO, 2010).
Healthy eating pyramid

Fig 1 Healthy eating pyramid

Source: www.nutritionaustralia.org/national/resource/healthy-eating-pyramid
2.4 Narrative review

In a literature review one can either choose a narrative or systematic review. Fink (2005) states that a literature review research can be used in diverse ways, proposals for funding and academic degrees being among them and it is usually done to understand a topic and bring to light what is currently known. A systematic review often includes a Meta analysis component which involves using statistical techniques to synthesis the data from several studies into a single quantitative estimate or summary effect size. A systematic review typically involves a detailed and comprehensive plan and such strategy derived a priori, with the goal of reducing bias by identifying, appraising and synthesizing all relevant studies on a particular topic. (petticrew &Robert 2006) Narrative review is un informative explanatory analysis discerning what works for who, in what circumstances, in what respect and how (Pawson, 2005). A narrative review tend to be mainly descriptive does not involve a systematic research of the literature and thereby often focus on subset of studies in an area chosen based on availability or author’s selection. (Petticrew & Roberts 2006) Narrative review will be used in this thesis to answer the research question, what is the impact of exercise (physical activity) and healthy lifestyle have among the youth.

The goal of the review is a comprehensive summarization in everyday term of specific events experienced by individuals and groups. According to Mays et al (2005), a narrative review seeks to summarize and interpret evidence of a particular topic or question using either qualitative and or a qualitative evidence. It is anticipated that a narrative review, informed by a systematic review methodology, could serve to provoke thought and controversy (Green et al, 2006), provides overviews and integrations of an area, pulls together what is known about a particular phenomenon, and allows researchers to address much broader questions than a single empirical study could. According to Polit & Beck (2006), meta-synthesis is used to integrate, evaluate and interpret the findings of multiple qualitative research studies. It involves analyzing and synthesizing key elements of each study with the aim of transforming individual findings into new conceptualizations and interpretations. I use a narrative review as it synthesis’s the literature I got from searches from computerized databases where I summarize them to make sense of the research and present an analysis so as to make it easier for the reader to assimilate and understand my research problem.
2.5 Self determination theory

While some individuals participate in regular PA simply for the enjoyment of exercising, others appear to exercise to attain intrinsic or extrinsic rewards such as losing weight, being more attractive, or obtaining recognition from significant others (Deci & Ryan, 2008). Previous research has shown that individuals who exercise out of enjoyment rather than being motivated by intrinsic or external rewards are more likely to adhere to a specified exercise program (Deci & Ryan, 2008). Since the goal of health professionals is to promote a continued active lifestyle in individuals not currently meeting the current PA recommendations, studying the cognitions that are related to motivation has recently been at the centre of much investigation into understanding how to promote long-term behavior change. One theory of human motivation that has been applied extensively to the understanding of exercise behavior is the self-determination theory (Deci & Ryan, 2008).

Although there are many approaches to initiating behavior change, research has shown that, long-term engagement in exercise is ineffective without consistent motivational environment based on autonomously supportive interventions (silva et al, 2011). The SDT, in contrast, focuses on the processes through which a person acquires the motivation for initiating new health-related behaviors and maintaining them over time. According to self determination theory, people need to feel the following in order to achieve such psychological growth.

- A competence people need to gain mastery of task and learnt different skills.
- Connection or relatedness: people need to experience a sense of belonging and attachment to each other.
- Autonomous people need to feel in control of their own behaviors and goals.

The theory assumes that individuals by nature are active, interested, curious, self-motivated, and eager to succeed. What it also recognizes though is that individuals can be alienated or passive and disaffected and accounts for these differences in terms of the
types of motivation, which stems from the interaction between individuals inherent active nature and the social environments that either support or thwart that nature (Deci & Ryan, 2008).

Specifically, the SDT proposes that behavioral regulation towards an activity varies in the extent to which it is autonomous (self-determined), which involves behaving with a full sense of volition and choice, or controlling, which involves behaving with the experience of pressure and demand toward specific outcomes that comes from forces perceived to be external to the self (Deci & Ryan 2008). Furthermore, the theory proposes that individuals have three basic psychological needs, autonomy, competence and relatedness. Autonomy refers to being the perceived origin or source of one’s own behavior, competence, refers to feeling effective in one’s ongoing interactions with the social environment and experiencing opportunities of fulfillment, while relatedness refers to feeling connected to others and to have a feeling of belongingness with individuals and the community (Deci & Ryan, 2008). So when these three basic psychological needs are satisfied, an individual’s inherent activity will be supported, optimal motivation will be promoted, and positive psychological, developmental, and behavioral outcomes will be produced (Deci & Ryan, 2008). Conversely, social environments that thwart satisfaction of these needs yield less optimal forms of motivation and have deleterious effects on a wide variety of well-being outcomes.

To conclude, it is evident that the SDT is a dialectic theory which views the environment as nurturing need-satisfaction and motivation.

3. Implementation of thesis

3.1 Purpose, aim and problem

The purpose of this thesis is to find out the positive and negative aspects of physical activity and healthy lifestyle. My aim is to provide a comprehensive picture of knowledge relating to exercising and healthy lifestyle. This thesis is relevant to both the youth and it can be used by school nurse or public health nurse to educate and guide the youth.

The research problem is what is the impact of exercising and healthy lifestyle among the youth. The research question to be answered in this thesis is: How physical exercise and healthy lifestyle affect the youth physically, mentally and socially.
3.2 Research method
I use a narrative literature review to describe and analyze the impact of exercise (physical activity) and healthy eating among the youth’s physiological, mental and social well-being. According to (Merriam, 2009), I am interested in understanding how people make sense of their world and the experiences they have in the world. Sociologists using these methods typically reject positivism and adopt a form of interpretive sociology (Parkinson & Drislane, 2011).

3.3 Data collection

The method of data collection was literature review. The literature search started with the research questions. Through the inclusion and exclusion criteria useful and relevant material and articles were gathered. The collection of data commenced in June from EBSCO, reliable electronic publications including who and pub med, and Google.

Tab 1: Inclusion and exclusion criteria

<table>
<thead>
<tr>
<th>Inclusion criteria</th>
<th>Exclusion criteria</th>
</tr>
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<tbody>
<tr>
<td>From 2003 to 2015</td>
<td>Older than 2003 non submissive</td>
</tr>
<tr>
<td>Full text</td>
<td>Non full text</td>
</tr>
<tr>
<td>Free articles</td>
<td>Payable article</td>
</tr>
<tr>
<td>English text</td>
<td>Other languages irrelevant due to interpretation</td>
</tr>
<tr>
<td>Youth</td>
<td>Other age groups</td>
</tr>
<tr>
<td>Health lifestyle</td>
<td>Unhealthy lifestyle</td>
</tr>
<tr>
<td>Exercise (physical activity)</td>
<td>In activity</td>
</tr>
</tbody>
</table>

3.4 Data analysis
Analysis of data is important so as to acquire relevant material according to the research questions. Inclusions and exclusion criteria aids in the analyzing process, there by being
able to identify the articles that are useful and those that are not in accordance to relevance. (A. Helen. 2010)

To get a clear picture and to stay on track inclusion and exclusion criteria is useful also in showing the depth of the data analysis (A. Helen 2010)

Fink (2005, 4&5) mentioned there is seven criteria’s used in conducting research in literature review and they include:

- Selecting research questions
- Selecting bibliographic or articles databases, websites & other sources
- Choosing search terms
- Applying practical screening criteria
- Application of methodological screening criteria
- Reviewing the data to show validity and reliability, done through using a standardized form for retrieving data from articles
- Synthesizing the results done through a descriptive way by reviewing the findings

The articles were obtained from CINAHL and academic search elite database searches, both hosted by EBSCO, the results were categorized according to the keywords used. In CINAHL database search the key words used were youth, exercise and healthy lifestyle which got a total of 720 articles in total, 500 of the articles contained the abstract and 450 of them contained full text, 220 of them did not meet the criteria and I choose at random 10 articles to read and analyze and they were able to answer the research question.

The key word youth which got 1000 articles in total and 600 of the articles contained only abstract without full text and 320 of them contained full text, I was able to read and analyze 10 articles, 4 of them did not meet the criteria for inclusion and I was able to select 6 of the articles which were able to answer the research question.

The key word exercise was used and 1500 were found in total and 420 of the articles contained abstract and 200 of them contained full text 50 of them were relevant to the
research question, I choose at random 20 articles to read and analyze and 16 of the articles answered my research question.

The key words healthy lifestyle got 750 articles in total and 400 of the articles contained only abstract without full text and 70 of them contained full text, I choose at random 6 articles which answered my research question. The academic search elite got, upon using the keywords youth, physical exercise, healthy lifestyle 150 articles were found, I read through abstracts of 10 of the articles that were selected randomly to conclude if to obtain the full text of the studies, after evaluation, I managed to get 8 articles that concentrated on the topic of the impact of exercise and healthy lifestyle among the youth, for possible inclusion. I read through the contents of the articles and studies including the data collection, data analysis, findings and conclusions, of the original 8 articles 3 met the research criteria and were good input on shedding light to previous work but was not used for this final project.

Tab 2: Summary of included studies

<table>
<thead>
<tr>
<th>Articles</th>
<th>Authors</th>
<th>Method</th>
<th>Results</th>
<th>Results supporting authors aim</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical activity sedentary behavior and dietary habits among Saudi adolescents relative to age, gender and region</td>
<td>Al-hazza, H.M., Abahussain, N.A., Al-soboyel, H.I., Qahwai, D.M., &amp; Musalger, A.O (2011)</td>
<td>Literature review</td>
<td>There is a social cultural fact that female students have fewer opportunities to go from hostel for physical activity. Physical activity and sedentary behavior and dietary habits-high percentage</td>
<td>Almost half of the male and two thirds of the females were not physically active according to the physical activities guidelines. Physical activity was significantly positively associated with</td>
</tr>
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</table>


<table>
<thead>
<tr>
<th>“So what is developmentally appropriate sport”</th>
<th>Bailey, R.P (2012)</th>
<th>Literature review</th>
<th>Physical activity is recognized to contribute to a range of outcomes</th>
<th>positive outcomes in physical, mental health, social wellbeing, cognitive and academic performance</th>
</tr>
</thead>
<tbody>
<tr>
<td>84% male and 94% female of the students spent more than two hours watching television</td>
<td>most of the students did not take breakfast</td>
<td>fruits and vegetables intakes but not with sedentary lifestyle. Sedentary behavior, physical inactivity and dietary habits were highly prevalent among secondary school youth.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Engaging community sport and recreation I population health interventions: factors affecting formation, implementation and institutionalization of partnership effects</td>
<td>Casey, M, Payne, W., Brown, S and Eime, R. (2009)</td>
<td>Literature review</td>
<td>Proper management of sport and recreational facilities produce positive outcomes</td>
<td>To make the point that the encouragement of sport and recreation organization has potential to facilitate health promotion and public health.</td>
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</tr>
<tr>
<td>Interventions to increase physical activity among healthy adults</td>
<td>Conn VS, Hafdahl AR, Mehr DR. (2011)</td>
<td>Literature review</td>
<td>Physical activity that meet current guidelines is linked with important health outcomes such as reduction in cardiovascular disease.</td>
<td>To find out the effects of interventions designed to increase physical activity</td>
</tr>
<tr>
<td>“The “what” and “why” of goal pursuits: human needs and the self determination of behavior”</td>
<td>Deci E.L and R.M Ryan (2008)</td>
<td>Literature review</td>
<td>People who engage in physical activity and eat healthy foods have a higher chance of living a healthy lifestyle.</td>
<td>When the three basic physiological needs are satisfied (autonomy, competence and relatedness) an individual</td>
</tr>
<tr>
<td>Associations between coping with anger and feelings of depression among the youth</td>
<td>Goodwin, R.D (2006)</td>
<td>Literature review</td>
<td>Youth were more likely to participate in physical activity are less likely to feel depressed.</td>
<td></td>
</tr>
<tr>
<td>inherent activity will be supported and optimal motivation will be promoted.</td>
<td></td>
<td></td>
<td>Physical activity is one of the most basic human functions and needs which has benefits across the lifespan.</td>
<td></td>
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Early adulthood; A longitudinal cohort study such as smoking and drinking level

| Integrating physical activity into mental health service for persons with serious mental illness | Richardson, c.r., Faulkner, G., McDevitt, J., Skirinar, G.S., Hutchinson, D.S., and Piette, J.D. (2005) | Literature review | It is necessary for people with mental illness to have frequent contact with their mental health service providers whose reinforcement can play a critical role in the successful long-term adaptation of regular physical activity | Does physical activity play a role in the recovery of mental health? |
4. Results and conclusion

4.1 Physical exercise and youth
According to U.S. Department of Health and Human services (2008) people who exercise and eat healthy food have a higher chance of living a healthy lifestyle. Most findings on the effectiveness of exercise intervention and dietering suggest that exercising and dieting arrangements’ designed to reduce the immediate and potential long term health effects should include a focus in improving and maintaining physical fitness through physical activity. Exercise intervention for exercising and dieting include aerobic activity e.g. cycling, walking, resistance training (weights) or some combination. According to Telama (2005) health-related behaviors’ (physical activity, dietary habits, locus of control and quality of life) are risk factors for the development of many diseases in adulthood. The late adolescence period of life is important because at this stage of life, the adolescents are independent in choosing their lifestyles and different habits which will affect their whole life. So, they have more chances to develop unhealthy health-related behaviors.

A study conducted in Finland to explore an association between physical activity and risk of health behaviors among the youth, which considered educational ambitions and family influence on their lives, showed that boys were more physically active than girls (vuori et al 2012). As far as ambitions of education were concerned, girls were commonly considered as having higher education than the boys. Large studies have found that girls who play sports have lower pregnancy rates, engaged in sexual intercourse less frequently, have fewer partners and begin sexual activity later than those not involve in sports.

Children’s engagement in sports competition is known to contribute to the developmental outcomes for a healthy lifestyle, where children learn about physical, social and cognitive
skills (Choi et al, 2014). More broadly, engagement in physical activity is also recognized to contribute a range of positive outcomes, specifically; physical and mental health, social wellbeing, cognitive and academic performance (Bailey et al. 2012). According to WHO (2006), there is evidence to suggest that improved nutrition enhances learning ability leading to better academic performance. Exposing children to balanced and nutritious food throughout childhood reinforces lifelong eating habits thus contributing to their overall wellbeing and helping them enjoy a healthy and fulfilling life in the future.

Plenty of research has been done on the effects of physical activity on health behavior and healthy lifestyle (Casey et al, 2009; Goodwin, 2006; Donaldson & Finch, 2012; Lloyd, 2005). Physical activity was associated with a decreased likelihood of depression in a survey of 9,938 school-age children. Male youths were more likely to participate in physical activity and less likely to feel depressed (Goodwin, 2006). In a population sample of 19,288 adolescent and adult twins and their families, exercisers were found on average to be less anxious, depressed and neurotic (DeMoor et al., 2006). Persons who have experienced coronary heart failure (CHF) undergo a dramatic reduction in their quality of life, which commonly causes them anxiety and depression. Clinical trials involving these patients have observed marked improvements in exercise capacity. The evidence suggests that exercise can play an important role in improving function and quality of life of patients with CHF (Lloyd-Williams & Mair, 2005)

According to U.S Department of Health and Human services (2008) and WHO (2010), youth who participate in organized sport and school of in the community are less likely to engage in risky behavior than no sports participants. Accordingly, Male and female teenaged athletes are less likely to use drugs, including marijuana, cocaine, crack cocaine, heroin and hallucinogens. Both male and female sports participants report a slightly higher incidence of binge drinking than non-sports participants, but lower overall alcohol use. Further, in both genders, taking breakfast irregularly, smoking, studying in vocational schools and poor self-perceived health was strongly associated with persistent inactivity. Results showed that persistent physical inactivity in adolescent had a relationship with less healthy life style, bad educational progress and poor self perceived health.

Youth who are physically active and participate in team sport are less likely to engage in unhealthy behavior such as substance abuse and risky sexual activities than those not involved in team sport. Fewer boys in team sport were found to have used “other drugs”
like cocaine, heroin and methamphetamines, compared to their active counterparts, for female students, however, the combination of team sports and physical activity was particularly important. Female teens who participated in team sports and who were vigorously active were less likely to engage in risky behavior than teens who were only part of a team or only exercised vigorously. This result indicated that persistent physical inactivity in adolescent had a relationship with less healthy lifestyle, bad education progress and poor self perceived health.

A longitudinal cohort study conducted by Kwan et al (2012), to distinguish the methods of physical activity based on gender and educational level in a sample representative of adolescents on binge drinking, smoking, education level and demographics showed that there was by and large (24%) decrease in physical activity during the period of 12 years. A remarkable decrease in physical activity was observed during the transition of young adults into early adulthood, and the decline was clear among men who started college or university. The results also indicated an increase in many health risk behaviors during adolescence although smoking and binge drinking decreased gradually after their maturity. Nerin et al (2004) cross sectional research on the prevalence of tobacco users among university students participating in different sports found that physical exercise in adolescence when used as preventive program served as an obstacle to start smoking.

In the examination of health related lifestyle among students residing in university hostels in Egypt, looking at perceived health status, social support, unhealthy dietary behaviors physical activity behaviors, smoking, sleep behavior and specific harmful behaviors, female students were reported to be deficient in physical activity compared to their male counterparts. According to Al-hazza et al (2011) this study indicated that it may be a social cultural fact that female students have fewer opportunities to go out from hostel for physical activities.

Al-hazza et al (2011) observed the preference of physical activity sedentary behavior and dietary habits in adolescents of 15-19 yr old and their results showed a high percentage (84% male and 94% female) of the students spent more than 2 hours watching television daily. Almost half the males and two thirds of the females were not physically active according to the physical activities guidelines. Most of them did not take daily breakfast, vegetables, fruits and milk. Physical activity was significantly positively associated with fruits and vegetables intake but not with sedentary lifestyle, however the studies concluded
that sedentary behavior, physical inactivity and dietary habits were highly prevalent among secondary school adolescence.

Casey et al (2009) make the point that the engagement of sport and recreation organizations has potential to facilitate health promotion and public health. To enhance organizational capacity and achieve program sustainability, it is important that organizational processes, structures, and resources that support long-term health promotion practice are effectively and efficiently planned and managed. Participation in a supervised exercise-therapy program improved measures of self-esteem among obese and morbidly obese adolescents over time (Daley et al., 2006). Recently, Donaldson and Finch (2012) have presented an argument for the idea of health promoting sports clubs‘. In their review of the evidence they examined approaches in Scandinavia and Australia where the first main focus was using sports clubs to promote health messages. More recently, the focus has shifted to using health promotion messages as a mechanism for increasing participation in sport.

Fig 2 physical activity and youth

Coping with physical activity is effective if one can be able to facilitate and accept the physical changes and also the need to rectify the situation.
4.2 Physical activity and healthy lifestyle

Conn et al (2011) conducted a meta-analysis summarizing the effects of interventions designed to increase physical activity among healthy adults. Their findings indicated that interventions designed to increase physical activity were modestly effective. Regular physical activity that meet current guidelines is linked with important health outcomes, including reductions in cardiovascular disease, type 2 diabetes, some cancers, falls, osteoporotic fractures, and depression, and improvements in physical function, weight management, cognitive function and quality of life.

Physical activity, it has been shown, is inversely associated with cognitive decline. Case control studies tend to show a slight beneficial influence of physical activity against Alzheimer’s disease. Prospective analyses (similar to longitudinal studies) tend to show a more convincing protective effect of physical activity against Alzheimer’s as well as against all forms of dementia combined. No evidence of harmful effects from physical activity or exercise (including vigorous exercise) is evident (Laurin et al., 2005). There is tentative evidence that participating in exercise is associated with an alleviation of negative symptoms associated with schizophrenia, such as depression, low self esteem, and social withdrawal. There is less evidence that exercise may be a useful coping strategy for dealing with positive symptoms, such as auditory hallucinations (Faulkner, 2005).

When administered as an adjunct in alcohol rehabilitation, exercise regimens definitely have positive effects on aerobic fitness and strength. Evidence for the benefits of exercise during drug rehabilitation is less substantial. In either field of rehabilitation, the links at present between exercise and improved self-esteem, better abstinence, controlled consumption levels, and reductions in anxiety and depression are equivocal (Donaghy & Ussher, 2005). Physical activity plays role in the recovery of mental health. Richardson et al (2005) add two further reasons why physical activity program should be included in psychiatric services: The opportunity for individuals with mental illness to have frequent contact with their mental health service providers. As Richardson at al wrote, “… changing health behaviors can be difficult, and frequent reinforcement can play a critical role in the successful long-term adoption of regular physical activity” (p. 328)
To have a physically healthy lifestyle one has to be motivated and have a positive psychological and social experience.

4.3 Conclusion

The theory of self determination, a theory of “human motivation” has been applied extensively to the understanding of exercise behavior. The theory proposes that individuals have three basic physiological needs: autonomy, competence and relatedness. When these three basic physiological needs are satisfied an individual inherent activity will be supported optimal motivation will be promoted and positive psychological development and behavior outcomes will be produced.
The theory of self determination supports the literature review findings that people who engage in physical activity and eat healthy food have a higher chance of living a healthy lifestyle contribute to a range of positive outcomes, such as mental health, social well-being, and academic performance. Research also links regular exercise with reductions in heart disease, diabetes, depression, weight management which are all important health outcomes and contributors of quality life. Research has also shown correlations between those who are physically active and participate in team sport are less likely to engage in unhealthy behavior such as substance abuse that those not engaged. Further, physical inactivity as research shows, has a relationship with less healthy lifestyle, poor education progress and poor perceived health. Other notable benefits of exercise are the alleviation of negative symptoms associated with social well-being such as low self-esteem and depression. The nurse can very simply explain and encourage the youth in the safe and healthy way to improve the body both physically and mentally.

5. Reliability and validity

Validity can be defined as the degree to which an instrument measures what is supposed to be measured, it is the strength of the conclusions, in reference and propositions. Mugenda (2003) defines reliability as the measure of the degree to which a research instrument yields consistent results or data after trials. For validity I came up with research questions that systematically pertained to all that I wanted to find out during the study. The same key words were used in different searches; several articles from different authors got the same results of the impact of exercise and healthy lifestyle among youth. I used this as a measure of criteria to obtain my research material. I also used text from 2003-2015. The literature review has also enabled me to identify the kind of question asked in other studies and responses is such questions for reliability, The fact that the date collected was analyzed by one author leaves room missed information and this may affect the reliability of the results. I looked for the relevant text from different articles and used it in relation to my research question and I captured the useful information.
6. Discussion

People who exercise and eat healthy food have a higher chance of living a healthy lifestyle and less risk of getting those diseases associated with lack of physical activity and choice of lifestyle.

Engagement in physical activity is recognized as a contributor to a range of positive outcomes in physical and mental health, social well-being and cognitive and academic performances. Regular physical activity is also linked with important health outcomes such as reduction in cardiovascular disease, type 2 diabetes, depression, weight management cognitive function and quality of life.

Research indicates that those who are physically active and participate in team sport are less likely to engage in unhealthy behavior such as substance abuse and risky sexual activities than those not involved. Persistent physical inactivity had a relationship with less healthy lifestyle bad education progress and poor self perceived health.

Participation in a supervised exercise therapy program improves measures of self esteem among obese over time, there is tentative evidence that participating in exercise is associated with an alleviation of negative symptoms associated with schizophrenia such as depression, low self esteem and social withdrawal

In my view, and in line with the literature review exercising and dieting have had both negative and positive impact on youth’s lifestyle and healthy. Moderate dieting for insistence has been shown to be associated with negative self-esteem in some youth. Healthy lifestyle can be also have a significant impact on psychological health in youth during a time of rapid physical, psychological and social development.
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