eISSN: 2589-7799

2023 March; 6(3s): 672-682

A Study on Health Seeking Behavior Types of Nursing Students

Hye-Won Jeon¹, Jeong-Ah Yoon^{2*}, Myoung-Hee Kim³ and Mi-Young Chon⁴

¹Professor, Department of Nursing, Catholic Kkottongnae University, Korea

Email: hwjeon@kkot.ac.kr1

²*Professor, Department of Nursing, Tongmyong University, Korea

Email: yja9476@hanmail.net² (Corresponding Author)

³Professor, Department of Nursing, Semyung University, Korea

Email: mh1352@semyung.ac.kr³

⁴Professor, Department of Nursing, Konkuk University, Korea

Email: mychon@kku.ac.kr4

Abstract

This research was attempted to understand the types of the subjectivities possessed by the individuals regarding health seeking behavior types of nursing students by applying the Q-methodology and to comparatively analyze the special features. Regarding the subjects of the research, 39 nursing students at one university were made into the P-samples. And, by selecting 34 Q-samples from the total of 165 Q-populations, the forced distribution took place in terms of the 9-points scale. The data were analyzed with the QUANL program. As a result of the research, the 5 types were discovered. They appeared as 'Optimistic stress management type', 'Practical body management type', 'Passive rest-seeking type', 'Mind control-oriented type', 'Self-realization oriented type'. Based on these results, the special characteristics by each type regarding the health seeking behavior types of students must be understood and to provide basic data for the development of health promotion programs considering the individuality of each individual.

Received: 19 - January - 2023 Revised: 25-February - 2023

Accepted:27-March-2023

Keywords: health seeking behavior types, nursing students, Q-methodology

1. Introduction

1.1 Necessity of Research

The definition of health is shifting from a traditional biomedical concept to a healing model centered on multidimensional phenomena related to physical, psychosocial, spiritual, environmental, and cultural domains [1]. Health-seeking behaviors have also changed according to the definition of health of the time [2], and today, not only secondary prevention, which is an early diagnosis of diseases, but also overall life-related behaviors ranging from active and subjective self-activities are developing in order to maintain, promote, and activate a better self [3]. Going beyond secondary prevention based on disease models, health promotion and primary prevention play an important role in improving quality of life and extending lifespan, which is based on behavioral and sociopolitical models that can recognize the role of multidimensional systems in health outcomes [1].

Continuous health behaviors formed over a long period of time can lead to health habits, and once fixed, health habits are difficult to change, so it is important to eliminate health-harming behaviors and establish desirable health behaviors as soon as possible [4].

University students can be seen as the healthiest period through general health indicators, but many college students live away from their parents and families, and in the process of taking care of their own health, smoking, excessive drinking, irregular eating habits, economic difficulties, and relationships between the opposite sex, etc. reported experiencing high levels of stress. In addition, unlike high school, they are exposed to an autonomous and open situation, so they are more likely to be exposed to unhealthy habits rather than healthy culture and health promoting behaviors [5][6].

College students are a stage from late adolescence to early adulthood, and it is an important period when healthy habits are formed in adulthood, so health-seeking behaviors during this period have an important meaning in determining health until old age [7].

In particular, in addition to the various stresses experienced by general college students, nursing

eISSN: 2589-7799

2023 March; 6(3s): 672-682

students are threatened with their health due to the stress of the national examination for obtaining a nurse license, strict curriculum and hierarchical order, heavy learning, and practice in various clinical situations [8]. As medical personnel after graduation, nursing college students should become an important group of health professionals who take charge of education for patients' health promotion and lead positive changes so that they can pursue desirable health-seeking behaviors. Health education is a life course that can lead individuals' health habits in a positive or negative direction [9]. To this end, it is very important for nursing college students to recognize the importance of health, clearly understand the concept of health, and practice health-promoting behaviors to help promote national health as well as their own health [7].

Therefore, by using the Q methodology, which can understand the characteristics of each type according to the structure of human subjectivity, the types of health-seeking behaviors of nursing students were analyzed, and the characteristics and differences of each type were identified. Accordingly, in this thesis, the direction of health education for health promotion according to each type and basic data for program development and operation are presented.

1.2 Research Purpose

The purpose of this study is to identify the types of subjectivity individuals have regarding health information seeking behaviors and to find out their characteristics.

The specific purpose of this study is as follows.

- 1) To identify the types of subjectivity of nursing students' health-seeking behavior.
- 2) Confirm the characteristics and differences of each type of subjectivity for health-seeking behavior of nursing students.

2. Method

2.1. Research Design

Since the Q methodology is devised as a method of measuring the subjective ego, an individual's potential behavior, it is possible to understand the characteristics of each type according to the structure of human subjectivity [10], this study applied the Q methodology to investigate the subjectivity of nursing students' health pursuit behavior.

2.2. Q Sample Composition

In this study, the literature [11, 12, 13,14] related to health information seeking behavior was reviewed, and a sample of nursing students at a university in the Busan area was surveyed until the point when the statement data was saturated and In-depth interviews were conducted on 'what is the meaning of health and what are the efforts that are usually made for health'. Through this process, a total of 165 Q populations were extracted. Two nursing professors who had the experience of writing several papers using the Q methodology consulted these statements, arranged them so that the statements did not overlap for each item, corrected and supplemented, and finally decided on 34 Q statements.

2.3. P sample Selection

Since the Q methodology deals not with interindividual differences but with intraindividual differences in significance, there are no restrictions on the number and selection of P samples. The P sample of this study was a total of 39 nursing students who agreed to participate in this study and was selected in various ways considering gender and grade.

2.4. Q Classification

A card with a statement selected as the Q sample was presented to the P sample. After reading the 34 cards, the subjects selected the most negative (-4), neutral (0), and most positive (+4) according to the degree of agreement with their views and the scores received by the subjects were forced to be normally distributed on a 9-point scale (Table 1).

eISSN: 2589-7799

2023 March; 6(3s): 672-682

Table 1: Q Sorting Distribution

	Negative			Negative Neutrality			Posit	ive	
Score	-4	-3	-2	-1	0	+1	+2	+3	+4
Card No	2	3	3	4	6	4	3	3	2

2.5 Data Analysis Method

The collected data were scored from 1 point for the most negative case to 9 points for the most positive case, and Q factor analysis was performed using the PC QUANL program. In order to determine the ideal number of factors, the number of factors was input in various ways based on the Eigen value of 1.0 or higher, and five types judged to be ideal were finally selected through the calculated results. (Table 2).

 Table 2: Eigenvalues and Variance

	Type I	Type II	Type III	Type IV	Type V
Eigen values	12.03	2.88	2.38	2.03	1.49
Variance	0.31	0.07	0.06	0.05	0.03
Cumulative variance	0.31	0.38	0.44	0.50	0.53

3. Result

3.1 Formation of the Q Type

In this study, the subjective types of health information seeking behavior were analyzed into five types. Five factors explained 53% of the total variance, and as shown in (Table 3), the explanatory power of each factor was indicated as 31% for factor 1, 7.4% for factor 2, 6.1% for factor 3, and 5.2% for factor 4, factor 5 was 3.8%. 39 study subjects included 13 people in type 1, 4 people in type 2, 4 people in type 3, 6 people in type 4, and 12 people in type 5, and there were 4 (Type 1), 2 (Type 2), 4 (Type 4), and 3 (Type 5) people for each type with a factor weight of 1.0 or more. In each type, a person with a high factor weight is a person who contributed to classifying the type and is a person who shows characteristics representative of the type to which he/she belongs (Table 3).

Table 3: Types, Eigenvalues, and Demographic Characteristics for P-sample(N=39)

Type(n)	NO	Gender	Age	Grade	Eigenvalue
	1	Female	18	1	1.16
	3	Female	19	1	0.82
	5	Female	19	1	0.60
	7	Female	19	1	1.75
	9	Female	22	4	1.36
	11	Female	22	4	0.35
Type 1(n=13)	14	Female	21	4	0.37
	16	Female	22	4	0.48
	18	Male	21	2	0.76
	19	Male	21	2	0.85
	23	Male	22	2	0.57
	24	Male	22	2	1.13
	37	Male	23	3	0.97
	4	Female	20	1	0.77
Tuna 2(n-4)	6	Female	19	1	1.19
Type 2(n=4)	29	Male	22	2	2.17
	34	Female	21	3	0.90

eISSN: 2589-7799

2023 March; 6(3s): 672-682

	12	Female	22	4	0.92
Trung 2(n-4)	27	Male	22	2	0.47
Type 3(n=4)	33	Male	22	3	0.97
	39	Female	21	3	0.99
	15	Female	22	4	1.09
	25	Male	22	2	0.42
Tuno 4(n=6)	26	Male	22	2	0.21
Type 4(n=6)	30	Male	23	2	1.14
	32	Male	22	2	1.26
	35	Male	24	3	1.45
	2	Female	19	1	0.78
	8	Female	19	1	1.13
	10	Female	21	4	0.64
	13	Female	22	4	0.55
	17	Male	22	2	0.89
True 5(n-12)	20	Male	22	2	1.29
Type 5(n=12)	21	Male	22	2	1.26
	22	Male	22	2	0.64
	28	Male	23	2	0.63
	31	Male	21	2	0.69
	36	Female	22	3	0.60
	38	Female	21	3	0.64

3.2 Characteristics of Each Type

(1) Type 1: Optimistic Stress Management Type

A total of 13 subjects were classified as type 1. Classified by grade, there were 4 first graders, 4 second graders, 1 third grader, and 4 fourth graders and by gender, there were 8 female students and 6 male students. When classified by religion, there were 11 non-religious people, 1 Christian, and 1 Buddhist, and 4 people did not exercise at all, 3 people exercised 1-2 days a week, and 6 people 3-6 days a week, and there were 8 people who did not have a health checkup at all, 1 person every 1 year, 2 people every 2 years, and 2 people every 3 years.

Type 1 showed strong support for 'Have time to relieve stress (movies, travel, hobbies, etc.)' (standard score = 1.80) and 'I try to be optimistic and enjoy life every day' (standard score = 1.74). On the other hand, there were strong objections in items such as 'it's good to stay healthy to live a religious life' (standard score = -2.53) and 'I read books or newspaper articles related to health with interest' (standard score = -1.63). (Table 4).

Subject No. 7, who showed the highest factor weight of 1.75 in type 1, chose 'I try to live an optimistic and enjoyable life every day' and 'I have time to relieve stress (movies, travel, hobbies, etc.)' as the most agreeable items. The reason for choosing this is "I think it is important to be mentally healthy and live an optimistic and enjoyable life" and he replied "I think that one of the causes of many diseases is stress, and it is really important to have a hobby or travel that can properly relieve stress." On the other hand, the most objectionable items were 'I read books or newspaper articles related to health with interest' and 'it's good to stay healthy to live a religious life. The reason for choosing this was answered as follows: "Rather than reading health-related books or newspaper articles, I try to think about and practice good eating habits that can be known universally" and "I don't have a religion that I currently believe in, so I don't think religious life is that important."

Taking all into consideration, type 1 mainly showed strong positive attitudes toward relieving stress and trying to live an optimistic and enjoyable life. In fact, strong objections were shown to the active pursuit of

eISSN: 2589-7799

2023 March; 6(3s): 672-682

health information through health-related books and newspaper articles and the influence of religion. This seems to be the result of 85% (11 students) of non-religious students, and the items that differed greatly from other types were negative about regular general medical examinations and reading health-related books or newspaper articles. Based on these characteristics, type 1 was named 'optimistic stress management type' because it focuses on thinking optimistically and managing stress rather than actively pursuing physical health such as health checkups or comprehensive checkups.

Table 4: Descending Array of Z-scores and Item Description for Type 1(>+1.00, <-1.00)

NO	Statement	Standard Score
12	Have time to relieve stress (movies, travel, hobbies, etc.)	1.80
3	I try to be optimistic and enjoy life every day	1.74
1	Maintain meaningful and satisfying interpersonal relationships	1.49
13	I take a rest when I am not feeling well	1.33
19	I have someone close to whom I can discuss personal problem and concerns	1.18
28	I try to change for the better	1.02
25	Even if I don't do any special exercise, I think going to and from school is exercise	-1.09
6	I have regular medical checkups	-1.32
10	I don't do anything because I don't think I'm particularly healthy.	-1.46
2	Read books and newspaper articles related to health with interest	-1.63
8	I think it's good to stay healthy to live a religious life	-2.53

(2) Type 2: Practical Body Management Type

There were 4 subjects classified as type 2. By grade, there were 2 first graders, 1 second grader, and 1 third grader, by gender, there were 3 female students and 1 male student. Regarding religion, all 4 people were non-religious, 1 person did not exercise at all, 1 person did 1-2 days a week, 1 person did 3-6 days a week, 1 person did not do health checkups at all, 2 people every 1 year, 1 person every 2 years.

Type 2 showed strong support for items such as 'I have regular medical checkups' (standard score = 2.08) and 'I consult with a doctor or health professional if I have abnormal physical symptoms' (standard score = 1.58). On the other hand, there was a strong dissenting opinion in items such as I think it's good to stay healthy to live a religious life' (standard score = -1.87) and 'I don't do anything because I don't think I am particularly unhealthy' (standard score = -1.61). (Table 5).

In type 2, 29 subjects with the highest factor weight of 2.17 selected 'I have regular medical checkups' and 'I consult a doctor or a health professional if I have abnormal physical symptoms' as the most agreeable items. The reason for choosing this was, "It is important to check my health through a comprehensive medical examination" and "I can find out about unknown diseases through consultation with a medical practitioner". On the other hand, the most objectionable items were 'I think it's good to stay healthy to live a religious life' and 'No matter what happens, I think it's okay'. The reason for choosing this was "I don't think there is anything that can be gained through a life of faith" and "I don't think it's right to be careless about health."

As for the items that differed significantly from other types, they showed strong support for the importance of regular comprehensive medical examinations and finding a doctor or specialist when abnormal physical symptoms appear. However, they showed strong negativity in the items of trying to change for the better, satisfactory interpersonal relationships, and stress management.

Taken it all together, Type 2 is a type that is more interested in practical and realistic physical health rather than various health areas such as interpersonal relationships, self-realization, and stress management, so type 2 was named 'Practical Body Management Type'.

eISSN: 2589-7799

2023 March; 6(3s): 672-682

Table 5: Descending Array of Z-scores and Item Description for Type 2(>+1.00, <-1.00)

NO	Statement	Standard Score
12	Have time to relieve stress (movies, travel, hobbies, etc.)	1.80
3	I try to be optimistic and enjoy life every day	1.74
1	Maintain meaningful and satisfying interpersonal relationships	1.49
13	I take a rest when I am not feeling well	1.33
19	I have someone close to whom I can discuss personal problem and concerns	1.18
28	I try to change for the better	1.02
25	Even if I don't do any special exercise, I think going to and from school is exercise	-1.09
6	I have regular medical checkups	-1.32
10	I don't do anything because I don't think I'm particularly unhealthy.	-1.46
2	Read books and newspaper articles related to health with interest	-1.63
8	I think it's good to stay healthy to live a religious life	-2.53

(3) Type 3: Passive Rest-Seeking Type

There were 4 subjects classified as type 3. By grade, there were 2 2nd graders, 1 3rd grader, and 1 4th grader. By gender, there were 2 female students and 2 male students. When classified by religion, there were 2 Christians, 1 Buddhist, and 1 non-religious person. 3 people did not exercise at all, 1 person did 3-6 days a week, 3 people did not take a health checkup at all and one person received a health checkup every two years.

People belonging to type 3 showed strong support for the items such as 'I get enough sleep' (standard score = 1.93), 'Maintain meaningful and satisfying interpersonal relationships' (standard score = 1.85), and 'I take a rest when I am not feeling well' (standard score = 1.52). On the other hand, strong opposition was shown in items such as 'Avoid stimulating foods (spicy, salty, and sweet foods)' (standard score = -1.85) and 'No matter what happens, I think it's okay' (standard score = -1.41). (Table 6).

The item with a difference compared to other types showed a strong positive response in 'I think it's good to stay healthy to live a religious life', which seems to be because 75% (3 students) of students have a religion, to moderate physical activity' showed a strong negative.

In type 3, subject No. 39, with the highest factor weight of 0.99, selected 'I get enough sleep' and 'I take a rest when I am not feeling well' as the most agreeable items. The reason for choosing this was, "I think that a healthy life without stress comes from getting enough sleep" and "Once the body is comfortable, all parts including the mind will be comfortable". The most objectionable items were 'Doing light to moderate physical activity (e.g. walking for 30 to 40 minutes at least 3 times a week)' and 'Exercise in everyday life (e.g. walking to nearby bus stops, using stairs instead of elevator)'. As for the reason for choosing this, he replied, "I think these are just daily routines and not for health."

When reviewing this comprehensively, type 3 considered it important to get enough sleep and rest when not feeling well, and showed strong opposition to avoiding stimulating foods, and answered that they could not avoid them because they were delicious. In addition, the reason for the strong opposition to doing light or moderate physical exercise was that 75% of the subjects did not exercise at all even though they saw that these were daily activities and not activities for health, and based on these characteristics, type 3 was named as 'passive rest-seeking type'.

Table 6: Descending Array of Z-scores and Item Description for Type 3(>+1.00, <-1.00)

NO	Statement	Standard Score
7	I get enough sleep	1.93
1	Maintain meaningful and satisfying interpersonal relationships	1.85
13	I take a rest when I am not feeling well	1.52

eISSN: 2589-7799

2023 March; 6(3s): 672-682

4	When I'm stressed, I usually watch funny and interesting YouTube (5 minutes fast)	1.50
8	I think it's good to stay healthy to live a religious life	1.23
12	Have time to relieve stress (movies, travel, hobbies, etc.)	1.16
3	I try to be optimistic and enjoy life every day	1.09
5	Eat plenty of fiber-rich foods, such as fruits and vegetables	1.08
26	Eat regular meals three times a day	-1.00
23	Exercise in everyday life (e.g. walking nearby bus stop, using stairs instead of elevator)	-1.26
17	I don't eat delivery food and eat mostly home-cooked food	-1.29
22	Doing light to moderate physical activity (e.g. walking for 30 to 40 minutes at least 3 times a week)	-1.37
31	No matter what happens, I think it's okay	-1.41
15	Avoid stimulating foods (spicy, salty, and sweet foods)	-1.85

(4) Type 4: Mind Control-Oriented Type

A total of 6 subjects were classified as type 4, and by grade, 5 2nd graders and 1 4th graders, and by gender, 1 female student and 4 male students. According to religion, there were 2 Christians, 4 non-religious people, 1 person did not exercise at all, 4 people 1-2 days a week, 1 person 3-6 days a week, and regarding the health examination, 3 subjects did not do it at all, and 1 subject every 2 years.

Subjects belonging to type 4 showed strong support for the following items: 'Think of the present without predicting the outcome or worrying about the future' (standard score = 1.87), 'I have someone close to whom I can discuss personal problem and concerns' (standard score=1.46). On the other hand, they showed strong dissenting opinions on the following items: 'I think it's good to stay healthy to live a religious life' (standard score = -1.65), 'There is a balance between work(study) time and play time' (standard score) = -1.60) and others showed strong dissenting opinions. (Table 7).

Among the items with a difference compared to other types, the items with strong approval were as follows: 'Think of the present without predicting the outcome or worrying about the future' and 'No matter what happens, I think it's okay', and strong negativity was shown in 'I get enough sleep' and 'There is a balance between work(study) time and play time'.

In Type 4, the items that subject No. 35, who had the highest factor weight of 1.45, chose as the most agreeable items were 'I consult a doctor or a health professional if I have abnormal physical symptom' and 'I often observe and check changes in' the body'. The reasons for choosing these are "I think that if you consult with a specialist right away when abnormal symptoms appear, you can catch the disease at an early stage" and "I usually check my body when I take a shower to see if there is anything wrong. Through this, he answered, "If there is a disease, it is because I think it will be possible to find it at an early stage and go to the hospital more quickly." On the other hand, the most objectionable items were 'I get enough sleep' and 'There is a balance between work(study) time and play time'. The reason for choosing this was "It's not that I'm not interested in health at all, but since grades are so important for getting a job, it's hard to catch up with other students if I study while sleeping enough", "I think I have to focus on one thing. Therefore, during the semester, the ratio of time to play and time to study is 8:2, so I devote myself almost exclusively to studying. It is because I think that if I do not do this, I will not be able to get good grades."

Considering all of this, Type 4's are more likely to think about the present rather than worrying about the future, that they can do it no matter what, and that this is fine. In addition, since it relatively focuses on mind management rather than body management, type 4 was named 'mind control-oriented type' based on these characteristics.

eISSN: 2589-7799

2023 March; 6(3s): 672-682

Table 7: Descending Array of Z-scores and Item Description for Type 4(>+1.00, <-1.00)

NO	Statement	Standard Score
32	Think of the present without predicting the outcome or worrying about the future	1.87
19	I have someone close to whom I can discuss personal problem and concerns	1.46
28	I try to change for the better	1.27
33	I consult a doctor or a health professional if I have abnormal physical symptom	1.27
3	I try to be optimistic and enjoy life every day	1.24
4	When I'm stressed, I usually watch funny and interesting YouTube (5 minutes fast)	1.18
31	No matter what happens, I think it's okay	1.12
24	I control myself so that I don't get tired	-1.16
6	I have regular medical checkups	-1.28
15	Avoid stimulating foods (spicy, salty, and sweet foods)	-1.51
14	I try to natural foods and food that do not contain many artificial additives and seasonings	-1.53
29	There is a balance between work(study) time and play time	-1.60
8	I think it's good to stay healthy to live a religious life	-1.65

(5) Type 5: Self-Realization-oriented Type

A total of 12 subjects were classified as type 5. By grade, there were 2 first graders, 6 second graders, 2 third graders, and 2 fourth graders. By gender, there were 6 female students and 6 male students. When classified by religion, there were 2 Christians, 1 Buddhist, and 8 non-religious people. Regarding health examination, there were 8 people who did not do it at all, 1 person every 1 year, and 3 people every 2 years.

Subjects belonging to type 5 showed strong support for the following items. 'I try to change for the better' (standard score=2.0), 'I get enough sleep' (standard score=1.96), 'Maintain meaningful and satisfying interpersonal relationships' (standard score=1.55). On the other hand, strong opposition was shown for the following items: 'I think it's good to stay healthy to live a religious life' (standard score = -2.08), 'I don't do anything because I don't think I'm particularly unhealthy. '(standard score=-1.49). (Table 8).

Among the items that showed differences compared to other types, strong support was shown for the following items 'I try to change for the better', and 'I control myself so that I don't get tired'.

Subject No. 20, who showed the highest factor weight of 1.29 in type 5, selected 'I get enough sleep' and 'I try to change for the better' as the most agreeable items. He answered the reason for choosing this as follows: "I think sleep is always lacking and I think I need to consciously take care of it more" "I think that a change in mind is a change in the body". On the other hand, the most objectionable items were 'Read books and newspaper articles related to health with interest' and 'I consult a doctor or a health professional if I have abnormal physical symptoms. He answered the reasons for choosing this as follows: "In modern society, there are already many resources available around you before you take time to pay attention" and "It is because you have a strong feeling of seeking a doctor out of necessity rather than consciously".

Taken together, Type 5 is changing itself and constantly striving for a better future than the present, as shown in the item 'I try to change for the better', which showed the greatest difference compared to other types. Therefore, based on these characteristics, type 5 was named Self-realization-oriented type.

Table 8: Descending Array of Z-scores and Item Description for Type 5(>+1.00, <-1.00)

NO	Statement	Standard Score
28	I try to change for the better	2.0
7	I get enough sleep	1.96
1	Maintain meaningful and satisfying interpersonal relationships	1.55

eISSN: 2589-7799

2023 March; 6(3s): 672-682

9	I know what's causing me stress right now	1.18
13	I take a rest when I am not feeling well	1.13
19	I have someone close to whom I can discuss personal problem and concerns	1.09
15	Avoid stimulating foods (spicy, salty, and sweet foods)	-10.9
27	Packaged foods are purchased with attention to nutrient content and ingredients	-1.14
6	I have regular medical checkups	-1.28
2	Read books and newspaper articles related to health with interest	-1.48
10	I don't do anything because I don't think I'm particularly unhealthy.	-1.49
8	I think it's good to stay healthy to live a religious life	-2.08

4. Discussion

This study identifies the types of subjectivity for the types of health-seeking behaviors of nursing students, identifies the characteristics and differences of each type, based on this, an attempt was made to present basic data on the direction of health education, program development, and operation for health promotion according to the characteristics of each type. The types of health-seeking behaviors of nursing college students were classified into 5 types, respectively named optimistic stress management type, Practical body management type, passive rest-seeking type, Mind control-oriented type, and Self-realization-oriented type.

Type 1, which accounted for 13 (33%) of the total research subjects, was 'optimistic stress management type' and thought that living an optimistic and enjoyable life was mentally healthy and important, and that hobbies or travels that could relieve stress were important.

In particular, nursing college students experience various nursing fields of clinical practice, and accordingly, feel the limitations of applying the theories learned at school to clinical practice in an unfamiliar environment, and experience clinical practice stress due to various crisis situations. When such stress accumulates without being resolved, it can harm one's health and reach a crisis in which one cannot participate in health-seeking behavior [15]. Since the stress of nursing students has a negative effect on mental health and life stress has a negative effect on health-promoting behavior [16], appropriate stress management can be said to be a desirable health pursuit that can improve health conditions. Therefore, it is necessary to check the level of stress in nursing students, and to strengthen stress coping using sufficient sleep, relaxation, and rest [17]. However, regular comprehensive medical examinations and reading health-related books and newspaper articles are negative, so it is necessary to encourage regular health examinations and professional health information seeking.

Type 2, which accounted for 4 (10.2%) of the total study subjects, is a 'practical body management type', and requires regular comprehensive checkups, food management, exercise, and multivitamin intake, compared to other types. On the other hand, conflict management, stress management, interpersonal relationships, and changes in a better direction are negative, so it is seen as a type of body-oriented health pursuit. Health promotion through regular health checkups can promote health through primary prevention and secondary prevention, so it is necessary to support continuous maintenance. However, since health promoting behavior can be increased through good interpersonal relationships and stress management as well as simple physical management [18], it seems necessary to educate or manage this.

Type 3, which accounted for 6 (15.4%) of the total research subjects, is a "passive rest-seeking type" that places importance on relaxation and rest, such as getting enough sleep and resting when the body is not feeling well. This type can support health promotion behavior by relaxing the body through appropriate rest and reducing stress. However, in the items that showed a negative response, light or moderate physical activity and exercise in daily life were considered not exercise, and in reality, 75% of the subjects who did not exercise at all were a type of passive health-seeking behavior. Therefore, it is necessary to encourage them to participate in active physical activities or interpersonal programs that can promote empathy or exchange with others [17].

Type 4, which accounted for 4 (10.2%) of the total research subjects, is the type that emphasizes mind control, and does not predict or worry about the outcome in advance and comforts itself by saying that this is okay. This type focused on managing the mind rather than managing the body to increase self-esteem, reduce life

eISSN: 2589-7799

2023 March; 6(3s): 672-682

stress [15], and increase health-seeking behavior. On the other hand, they responded negatively to 'getting enough sleep or having a balance between work and playtime', and if they are immersed in physical management or academic performance, stress or physical health may be threatened. This is consistent with the fact that in a longitudinal study [12] comparing health behaviors between nursing students and education students, nursing students showed fewer health behaviors that required time, such as sufficient sleep, breakfast, and exercise. Therefore, it seems necessary to establish a strategy for this.

Type 5, which accounted for 12 (30.8%) of the total research subjects, is a 'Self-realization-oriented type', and it is a type that constantly strives in a better direction compared to other types. This type has a high perceived self-efficacy. Since this can increase health promotion behavior [15], continuous support is needed. However, they showed strong negativity in terms of good nutrition, such as the balance between work and playtime, eating natural foods and foods that do not contain a lot of artificial additives and seasonings, and avoiding stimulant foods. Therefore, it is necessary to support physical health through educational programs related to the importance of this and correct nutrition information. This coincides with unhealthy eating habits and health behaviors, even though knowledge about health is more specialized than that of the general public [19]. Therefore, an educational strategy that can bridge the gap between knowledge about health and actual behavior is needed.

Therefore, based on the results of this study, it is necessary to develop a nursing strategy that helps nursing students maintain correct health behavioral habits through strengthening positive health-seeking behaviors and changing unhealthy behaviors according to the characteristics of each type of health-seeking behaviors. Therefore, it is necessary to develop a health promotion program suitable for it.

However, since the subjects were nursing college students at one university in Busan, it would be meaningful to compare the types of health-seeking behaviors with non-nursing college students in future research.

5. References

- [1] Pender, N. J, Murdaugh, C. L, Parsons, M. A. "Health Promotion in Nursing Practice," 5th ed. Pearson Prentice Hall. 2006.
- [2] B.H. Kim, H. K. Kim, Y. Jung, H. J. Kang. "An inquiry to the causal perception & health seeking behaviors of rheumatoid arthritis patients," Journal of KSSS, vol 3, pp. 145-166, 1998.
- [3] A. K. Kim. "Exploratory Study of the Korean health concept and health behavior," Journal of Korean Academy of Nursing, vol.24, no.1, pp. 70-84, 1994.
- [4] A. K. Kim. "Experience of Adult's health behavior via grounded theory methodology," Health & Nursing, vol.6, pp. 32-54, 1994.
- [5] M. Y. Park. "A study on influencing factors in health promotion lifestyle of college students," Seoul National University Graduate School, Master's Thesis, 1993.
- [6] Y. J. Park, S. J. Lee, K. S. Oh, K. O. Oh, J. A. Kim, H. S. Kim, S. S. Choi, S. E. Yi, C. J. Chung, H. Y. Jun. "Social support, stressful life events, and health behaviors of Korean undergraduate students," Journal of Korean Academy of Nursing, vol. 32, no. 6, pp. 792-802. 2002.
- [7] S. H. Hong. "The relationship between perceived health status and health promoting behaviors among nursing students," The Journal of Korean Academic Society of Nursing Education, vol.19, no.1, pp. 78-86, 2013.
- [8] M. H. Jeong, M. A. Shin. "The relationship between self-esteem and satisfaction in major of nursing students," The Journal of Korean Academic Society of Nursing Education, vol.12, no. 2, pp. 170-177, 2006.
- [9] Madeleine, C., Louis, W. J., Louise, B. Michel, P. Yves, L. "Health behaviors of nursing students: A longitudinal study," Journal of Nursing Education, vol. 41, no. 6, pp. 257-265, 2022.
- [10] H. K. Kim. "P sampling and Q Sorting," Journal of KSSSS. vol 5, no.5, pp. 19, 2007.
- [11] E. J. Ryu. "The influence of university students' family function and self-efficacy on their health promotion behaviors," Gwangju Nambu University Graduate school, Master's Thesis, 2015.
- [12] H. M. Seo. "Construction of health promoting behaviors model in elderly," Seoul National University Graduate School, Doctoral Dissertation, 2000.

eISSN: 2589-7799

2023 March; 6(3s): 672-682

- [13] J. Y. Lee. "The relationship between mindfulness and health promotion behavior among nursing students the mediating effect of self-efficacy," Kyungbook National University Graduate School, Master's Thesis, 2017.
- [14] W. S. Kim. "A comparative study on the perceived health status and health promoting behaviors of college students in a suburban campus according to type of living with parents," Catholic University Graduate School, Master's Thesis, 2003.
- [15] J. W. Oh. & Y. S. Moon. "A Predictive model of health promotion behavior in nursing students," Journal of Digital Convergence. vol 12, no. 20, pp. 391-403, 2014.
- [16] S. O. Kim. "The effects of self-esteem and life stress on health promotion behavior in nursing students," Journal of the Korean Applied Science and Technology. vol.39, no. 3, pp. 423-432, 2022.
- [17] K. I. Lee, J. Y. No. "The effects of health promotion behavior on the fatigue and depression of nursing students," Journal of the Korean society of Integrative medicine, vol 10, no. 3, pp. 53-62, 2022.
- [18] M. S. Lee, K. S. Kim, J. W. Ahn, S. Kim. "Study of stress, health promotion behavior, and quality of life of nursing students," Journal of Muscle and Joint Health, vol. 21, no. 2, pp. 125-134, 2014.
- [19] D. I. Park, S. C. Kwon, K. H. Han. "Health behaviors of Korean female nursing stydents in relation to obesity and osteoporosis.," Nursing Outlook, vol 63, pp. 504-511, 2015.