



Perceptions of students and faculty regarding selected health care practices at Montana State University
by Joyce Elaine Lubbers Burgett

A thesis submitted in partial fulfillment of the requirements for the degree of MASTER OF SCIENCE
in Nursing

Montana State University

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Abstract:

The purpose of this study was to determine the perceptions of Montana State University students and faculty members regarding primary prevention program measures for the health problems of smoking, alcohol abuse, and inadequate or excessive food consumption. The problem was investigated by: (a) a review of literature related to the problems; (b) a survey of a random sample of students and faculty members from Montana State University regarding their perceptions on the selected health care problems; (c) a tabulation, analysis, and comparison of data gathered.

The results of the study indicated general agreement between faculty and students concerning the items on the opinionnaires. The one area of significant difference in perceptions between the students and faculty members was on the smoking opinionnaire. The majority of the students felt it was desirable to raise the federal excise tax on cigarettes, differentially based on the level of tar and nicotine content. The faculty responses showed an even split. The other item which pointed out a significant difference was the item regarding the establishment of a state tax on tobacco sales to fund treatment for the prevention of smoking. The majority of students supported this while the majority of faculty did not.

Generally, faculty and students were in agreement on all three issues. Where there was disagreement, it tended to be one of difference between strength of agreement or disagreement. This agreement was particularly evident between faculty and students on items which dealt with education of both the general public as well as school children on all three of the opinionnaires.

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June 17, 1977

PERCEPTIONS OF STUDENTS AND FACULTY REGARDING SELECTED HEALTH CARE
PRACTICES AT MONTANA STATE UNIVERSITY

by

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A thesis submitted in partial fulfillment
of the requirements for the degree

of

MASTER OF SCIENCE

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Nursing

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ABSTRACT

The purpose of this study was to determine the perceptions of Montana State University students and faculty members regarding primary prevention program measures for the health problems of smoking, alcohol abuse, and inadequate or excessive food consumption. The problem was investigated by: (a) a review of literature related to the problems; (b) a survey of a random sample of students and faculty members from Montana State University regarding their perceptions on the selected health care problems; (c) a tabulation, analysis, and comparison of data gathered.

The results of the study indicated general agreement between faculty and students concerning the items on the opinionaires. The one area of significant difference in perceptions between the students and faculty members was on the smoking opinionaire. The majority of the students felt it was desirable to raise the federal excise tax on cigarettes, differentially based on the level of tar and nicotine content. The faculty responses showed an even split. The other item which pointed out a significant difference was the item regarding the establishment of a state tax on tobacco sales to fund treatment for the prevention of smoking. The majority of students supported this while the majority of faculty did not.

Generally, faculty and students were in agreement on all three issues. Where there was disagreement, it tended to be one of difference between strength of agreement or disagreement. This agreement was particularly evident between faculty and students on items which dealt with education of both the general public as well as school children on all three of the opinionaires.

Chapter 1

INTRODUCTION

The emphasis in disease prevention has changed dramatically since 1900. At the turn of the century, according to the U.S. Department of Health, Education, and Welfare (1975:16), the leading causes of death were pneumonia, influenza and tuberculosis. These conditions were amenable to public health efforts in the area of immunization, chemotherapy and other direct medical actions. Today's major health problems, those of a chronic nature such as heart disease, cancer, and stroke, on the other hand, are apparently linked to contamination of the environment and production-consumption patterns of an affluent life style.

To deal with today's major health problems, therefore, requires intervention in the social, economic, and cultural institutions in ways which produce changes in behavior patterns. This suggests that a program of change in health behavior might begin with feelings expressed by the people to be involved in the program.

Statement of the Problem

The problem of this study was to determine the perceptions of Montana State University students and faculty members regarding primary prevention program measures for the health problems of smoking, alcohol abuse and inadequate or excessive food consumption.

Need for the Study

Today's major health problems, especially chronic diseases, reflect a reduction in earning capacity of the people involved, reducing their efficiency and potential and costing the taxpayers of the United States billions of dollars for health care delivery services both for the care of the ill and the support of their families. According to Kotelchuck (1976:10), "In 1972, one out of every eight civilian, non-institutionalized persons in the U.S. (12.7%) was limited in activity to some degree due to a chronic condition, . . . 3% of the total population was totally unable to carry on his or her major activity." Of the 12.7% of the population restricted in activity, 21% of those individuals are between forty-five and sixty-four years of age, and should be at the peak age for earning capacity.

Kellogg (1975:31) reported that the American Academy of Nursing was in general agreement that the health system should shift from being sickness oriented to being health directed. To enable nurses to be involved with the preventive care concept, the Academy, according to Kellogg, saw a need for more research on what motivates people to seek preventive health care before they become sick.

General Questions to be Answered

The general questions were:

1. What were the perceptions of Montana State University students regarding primary prevention measures for the health problem of smoking?

2. What were the perceptions of Montana State University students regarding primary prevention measures for the health problem of alcohol abuse?

3. What were the perceptions of Montana State University students regarding primary prevention measures for the health problem of inadequate or excessive food consumption?

4. What were the perceptions of Montana State University faculty members regarding primary prevention measures for the health problem of smoking?

5. What were the perceptions of Montana State University faculty members regarding primary prevention measures for the health problem of alcohol abuse?

6. What were the perceptions of Montana State University faculty members regarding primary prevention measures for the health problem of inadequate or excessive food consumption?

7. Was there a difference between the perceptions of students and the perceptions of faculty members regarding smoking, alcohol abuse, and inadequate or excessive food consumption?

General Procedures

This study was developed in the following manner. A review of literature was made to provide documentation for the foundation of the study. From the information elicited in the review of relevant research, three survey opinionnaires were developed to gather data concerning Montana State University students' and faculty members' perceptions of measures for the prevention of smoking, alcohol abuse and inadequate or excessive food consumption.

The instruments were mailed to a random sample of Montana State University students and delivered to a random sample of Montana State University faculty members. The data were collected and compiled, and the findings assessed to determine the perceptions of students and faculty as well as to make a comparison of agreement or disagreement between them. The researcher drew conclusions and made recommendations for programs which might be more effective than present approaches to problems of smoking, alcohol abuse, and inadequate or excessive food consumption. Recommendations for further study were based on the perceptions of those surveyed.

Limitations

The study was constructed to consider only students attending Montana State University and faculty members of Montana State University. This study was limited to the population available in spring

quarter of the academic year 1976-77. The data were returned by mail from individual students and collected by the campus mail system from staff members.

Definition of Terms

Alcohol abuse. A chronic behavioral disorder manifested by an undue preoccupation with alcohol and its use to the detriment of physical and mental health, by loss of control when drinking and by a self-destructive attitude in dealing with personal relationships and life situations. (Insel and Roth, 1976:263).

Health care delivery system. The total package of services which includes but is not limited to medical care which reach the consumer. (Archer and Fleshman, 1975:xix).

Primary prevention. A program which includes actions or interventions designed to prevent etiologic agents from causing disease or injury in man. (U.S. Department of Health, Education and Welfare, 1975:98).

Secondary prevention. A program which is concerned with the early detection and treatment of disease to control or cure it. (U.S. Department of Health, Education and Welfare, 1975:98).

Tertiary prevention. A program which includes activities directed at lessening the seriousness of disease by reducing resulting

disability and dependence. (U.S. Department of Health, Education and Welfare, 1975:98).

Summary

The major goal of this research was to ascertain the perceptions of Montana State University students and faculty regarding primary prevention program measures for the prevention of smoking, alcohol abuse and inadequate or excessive food consumption and the differences between the perceptions of students and faculty. The need for the research was based on the fact that the rapidly changing life styles of an affluent culture has initiated health problems requiring behavioral change of society as a whole.

Chapter 2

REVIEW OF LITERATURE

The purpose of the review of literature was: 1) to develop a greater understanding of the changes in health care needs of consumers over the years, 2) to develop a greater understanding of the problems researched in the changing health care practices related to socially acceptable behavior patterns, and 3) to review the results of these research studies to identify findings which might indicate a correlation between chronic illness and smoking, alcohol abuse, and inadequate or excessive food consumption.

The Relationship of Selected Behavioral Patterns to Chronic Illness

Although Americans claim the highest standard of living in the world, Insel and Roth (1976:xviii) state that more than half of the adults in the United States are chronically ill. Heart disease, arthritis, and diabetes partially incapacitate more than twenty-two million Americans. Arteriosclerosis, a loss of elasticity and thickening of the walls of the arteries, hospitalizes thousands of Americans each day and eighty million Americans are classified as overweight. These chronic health problems can result in years of pain, emotional upheaval and disruption of family life while the medical bills for those involved grow steadily higher.

According to Lambo (1975:3), the growing wealth of technology has helped to control the health problems of other eras, but has initiated rapid and profound social changes. As old cultural patterns give way in a changing world, new patterns emerge for which society as yet lacks sufficient controls.

The United States Department of Health, Education and Welfare (1975:98) believes it is more productive to focus attention on the antecedent causes of diseases which may be preventable than treating the diseases themselves. The three stages of prevention are primary prevention, secondary prevention, and tertiary prevention. The Department of Health, Education and Welfare submits that high priority should be given to primary prevention programs aimed at the underlying causes of major disease conditions.

Three antecedent factors which are associated with major health problems are smoking, alcohol abuse and inadequate or excessive food consumption. These factors, if controlled, could improve the health of large numbers of people, according to the United States Department of Health, Education and Welfare (1975:99).

Smoking

According to Horn (1975:26), studies have confirmed a direct relationship between the incidence of smoking and cancer of the lung, larynx, oral cavity, bladder, and the pancreas; and non-neoplastic

diseases such as chronic bronchitis and emphysema, as well as diseases of the cardiovascular system.

Fuhs (1976:361) contends that the risk of developing coronary heart disease increases directly with the number of cigarettes smoked. "Mortality rates from coronary heart disease are five times higher in heavy smokers (those who smoke over two packs a day) who are between the ages of 35 and 50 years old than in non-smokers."

Of the many chemical compounds in tobacco smoke, Fuhs (1976:362) reports that two of the most significant are nicotine and carbon monoxide. The physiologic effects of nicotine, an addictive drug, on the heart are those of an exaggerated sympathetic response which increases the workload and oxygen demand on the heart. If coronary vessels are narrowed, coronary circulation may be unable to increase the needed blood flow to the heart, which results in local ischemia. The physiologic effects of carbon monoxide on the heart are involved with interference of oxygen transport. The affinity of hemoglobin for carbon monoxide causes oxygen to be displaced from the hemoglobin. The tissues are thus deprived of oxygen supply.

Weiss (1975:954) submitted that although the association between smoking and lung cancer does not prove the direct cause and effect, the association is consistent, strong and specific. He stated the evidence was overwhelming, smoking was the major precursor of lung cancer and

the coherence between the various lines of evidence was of a high order.

Horn (1975:26) reported the relationship between cigarette use and mortality was dose-related. Heavy smokers showed the highest death rates from smoking-related diseases and light smokers (fewer than ten cigarettes a day) even showed substantial risk of disease development.

Fuhs (1976:363) stated that eight hundred billion cigarettes are smoked annually in the United States. Approximately one-third of the adult population of the United States smokes.

Neeman and Neeman (1975:17) state that there has been a decline in the numbers of adult cigarette smokers in the United States population since 1964 when the Surgeon General's Report on Smoking and Health was released. However, they reported, records have shown that cigarette sales have been steadily rising because of the growing number of teenagers who are smoking today. For this adolescent age group, peer smoking was indicated as the most influential motivating factor to start smoking, followed by parents' smoking.

Studies by the National Clearinghouse for Smoking and Health, 1974, as reported by St. Pierre and Lawrence (1975:7) showed a 1% increase in male teenage smokers and a 7% increase in female teenage smokers since 1968.

Because smoking represents a personal-choice health behavior, according to Horn (1975:29), it is used to increase enjoyment of life or cope with life's problems. When carried beyond a certain point, however, this personal-choice health behavior creates problems for the individual and society at large. The problem for the individual involves the threat to his health. The problem for society involves lost man hours from work, higher accident rates among smokers and contamination of the air for nonsmokers. Because of the problem to society, caused by smoking, Horn submits that social forces can gradually play an increasingly important role in institutional change through legislation or change in customs.

Studies, reported by St. Pierre and Lawrence (1975:8), using the cognitive approach to behavior change by teaching the facts and hoping for a change in behavior have been unsuccessful. They submit that fear tactics and threats have been equally ineffective.

Fuhs (1976:365) reported three concepts which were vital to cessation of the smoking habit. 1) Motivation to stop must come from within the smoker so it is important that the smoker explore his feelings about smoking and look for individual motivational sources which may help him. 2) Perception that his state of health is affected by smoking and identify how his present state of health may be altered by stopping. 3) Emphasizing that a smoker has control over his fate and

just as he learned the habit of smoking, he can learn to stop smoking by demonstrating personal self-control.

Alcohol Abuse

Edwards (1975:10) reported that alcohol-related disabilities would rate as one of the world's largest amalgams of health problems on any assessment. Potential danger to physical health includes malnutrition, damage to almost every body tissue such as the liver, nervous system, the heart, the lungs, the stomach lining, and blood forming tissues, as well as broken bones resulting from alcohol related accidents. When used with tobacco, alcohol use increases the risk of developing certain cancers. Potential danger to man's social world includes industrial and highway accidents, family disruption, impairment of working efficiency and capacity of self-support. The potential mental disabilities include delirium tremens and general affective disturbances.

Alcohol, according to Insel and Roth (1976:263), is a dependence-producing drug which is classified as a central nervous system depressant. They content that the exact causes of alcoholism are not known, but that studies have shown an apparent genetic contribution to the susceptibility to alcoholism, along with many social factors such as cultural identity problems, movement away from spiritual interests, imitation of parents' habits and peer influences.

Lindesmith, Strauss and Denzin (1975:529) stated that behavior is not in itself considered deviant or nondeviant, but is defined as such by the culture in which it occurs. Alcohol dependence may have a variety of behavioral forms which in some social situations may be considered deviant, in others may be considered conventional behavior.

Edwards (1975:12) contended that alcohol dependence, often referred to as alcoholism, exists in degrees with many cultural colorings, while the alcohol related disabilities (physical, social, and mental) may come singly or in clusters. This disability is one which generally involves other problems. Even in a society permissive toward alcohol dependence, the dependent drinker will gather many related disabilities.

Mitchell (1976:513) submitted there are four drinking patterns associated with the alcohol abuser.

- 1) The reactive drinker. One who has selected alcohol as the primary buffer against tensions of life.

- 2) The psychiatric drinker. The manic phase of manic-depressive illness is often marked by excessive drinking. A higher than expected incidence of alcoholism among patients diagnosed as schizophrenic has been documented and attributed both to a marred sense of reality and to efforts to insulate one's self from anxiety.

- 3) The cross-use drinker. The cross use of alcohol and other drugs represents another behavior pattern; many substance abusers mix and match their drugs. Experimentation, risk-taking and continual need for heightened reaction can all be behind this cross-usage.

4) The recurrent drinker. This pattern of alcohol abuse is characterized by increasing ethanol tolerance and susceptibility to withdrawal symptoms. The individual moves from drinks gulped in sociable surroundings to secretive, compulsive binges, often interspersed with guilty periods of restless abstinence. Eventually, longer periods of heavier intake with lower tolerance and increased physiological signs of deterioration can be expected.

Mitchell (1976:511) stated that of the ninety-five million people in the United States who drink, nine million, or 7% of our adult population are alcoholics or alcohol abusers. One hundred thousand drinkers become alcoholics each year. Women alcohol abusers are becoming more conspicuous in our society and number between 900,000 and 4,500,000. Young people are using alcohol with increasing frequency and one university estimated that one quarter of its students were problem drinkers.

Kandel et al. (1976:50-51) contended that although 82% of the high school students studied have used hard liquor, beer or wine, intense usage may not develop until adulthood. They stated that alcohol and tobacco are the substances most frequently used by youth, in comparison to illicit drugs, and the substances which are most damaging in terms of social harm, yet have caused the least public concern because of our social definitions of appropriate and inappropriate behaviors.

According to Mitchell (1976:511), the cost of alcohol abuse in the United States annually amounts to twenty-five billion dollars in lost work hours, property damage and medical and welfare care.

Insel and Roth (1976:267) noted that treatment of alcohol abuse is difficult. None of the various methods such as Alcoholics Anonymous, psychotherapy, or chemical therapies have met with significant success, although the best rate of success seemed to involve a variety of the above mentioned techniques.

Inadequate or Excessive Food Consumption

The Department of Health, Education and Welfare (1975:103) reported that, "Nutritional problems range from malnutrition and 'dietary subnutrition', to obesity due to overeating, to the quality and safety of the food supply." Malnutrition can cause premature births; some studies have suggested an association between poor nutritional status in pregnancy, and retardation in fetal development. Malnutrition is generally discovered in poverty areas and in the aged population and results in subnutrition, obesity, atherosclerosis, vitamin deficiencies, anemia, and diabetes.

Terris (1975:1041), referring to studies by John Dobbing of the University of Manchester, stated that under-nutrition in early life may permanently reduce the intellectual capacity of men and women. Undernutrition at certain vulnerable stages of development in children

may be irreversible. The sequelae from undernutrition are diffuse and may never depress the individual attainment far below the lower limits of normality, yet may have serious consequences for the intellectual well-being of the people or section of society involved..

Insel and Roth (1976:336) contended that diseases such as coronary heart disease, diabetes, hypertension, obesity, and dental caries have all increased as diets became imbalanced with too much of the wrong kinds of foods such as excessive calories, animal fat, sugar and salt. In the United States, an imbalance of nutrients and fad diets seem to be the primary diet problems causing large number of people to be borderline malnourished.

Obesity, defined by Insel and Roth (1976:342), as the state in which a person's body fat exceeds 10% to 20% of their total body weight, affects 30% of all Americans. Overweight refers to people who weight more than their theoretical ideal weight for their respective sex, age and height. Obesity may be caused by the individual's failure to perceive internal cues from the satiety center of the hypothalamus. Excessive numbers of fatty cells are developed during early childhood, so weight loss or gain later in life consists of changes in size of the fatty cells developed earlier.

The United States Department of Health, Education, and Welfare (1975:103) reported that obesity is related to heightened susceptibility to diabetes, hypertension, arthritis, pulmonary dysfunction,

angina, gall bladder disease, and increases the complications following surgery. Saturated fats and cholesterol in diets seem to be associated with coronary heart disease as are dietary fats in the initiation and progression of atherosclerotic vascular disease.

The quality and safety of the food supply, according to the United States Department of Health, Education, and Welfare (1975:103), is endangered by additives, fortifiers, artificial colors and flavors, inadvertent contaminants, infectious agents and naturally occurring toxins.

Roth and Insel (1976:47) stated that humanity is exposed daily to thousands of chemicals whose potential for mutation is not known at this time. Many chemical additives, such as fluoride in the water, may be harmless until fluoride from an additional source is added to bring the total concentration to dangerous levels.

Behavioral Choices in Health Care

The Department of Health, Education, and Welfare (1975:97) recognized that many of today's major health problems are caused by factors not susceptible to direct medical intervention. "This poses a dilemma for health professionals in defining a proper role for themselves in the prevention of disease and a practical problem for those concerned with setting the boundaries of health planning."

Lambo (1975:3) saw health as more than an absence of disease, but part of the entire socio-religious fabric of man. He visualized health as an integral part of human experience, the responsibility for which each person and society must acknowledge rather than an exclusive responsibility of a single professional group.

Horn (1975:31) stated that the behaviors in the area of personal-choice health options present, "The real challenge to identify the means whereby we can help people--whether children or adults--to develop the capability of understanding the issues in personal-choice health behavior, and the capacity to make choices both in their own self-interest and in the interest of society at large."

Fuhs (1976:367-8) noted that the health worker must attempt to collate the learning program with activities or events which are important to the consumer and that fit into his personal ideas and life style. The author recognized the obligation of the professional health worker to strive actively for health ideals and set an example to increase his or her credibility with the public. The health worker can become actively involved in action to change society's acceptance of certain health options.

Milo (1976:435) stated that a paradox of health professionals is that they know what is most healthful but they don't always practice what they know. Health workers, as well as the ordinary consumer, make the easiest choices available to them most of the time. The aim,

therefore, may be to:

. . . broaden the range of options available to people and to make health-promoting choices easier and/or diminish health damaging options by making them more difficult to choose. For the most widespread impact, the focus might be on national-level policy-making which would in turn change the range of options for the largest number of people, i.e., the national population.

This frame of reference can also help assess or project the relative effectiveness of various efforts at behavior change. For example, a local effort at conveying more knowledge about healthful diets is not likely to result in changes of eating patterns unless it is accompanied by a combination of healthful, low cost, readily available foods--changes which require effort beyond the individual or small group methods, and extend to the community public and private organizational structure.

Summary

The review of literature pointed out a number of difficult problems and choices to be clarified by the health care delivery worker and the consumer involved. The review revealed that chronic illness was a large factor in the health economics of the nation; and that the health care worker and consumer might begin to assume joint responsibility for coordinating efforts to reach a satisfactory solution to the problem of preventative health care measures.

Chapter 3

PROCEDURES

The problem of this study was to determine the perceptions of Montana State University students and faculty members regarding primary prevention program measures for the health problems of smoking, alcohol abuse, and inadequate or excessive food consumption. Three instruments were prepared and mailed to a random sample of Montana State University students and delivered to a random sample of Montana State University faculty members. The instruments were designed to gain student and faculty perceptions of agreement or disagreement to the items listed in the opinionaires regarding the prevention of smoking, alcohol abuse, and inadequate or excessive food consumption.

In this chapter the outline of the study is presented in the following manner:

1. The population is defined and procedures for sampling are examined.
2. The investigation categories are defined.
3. The method of collection of data is discussed.
4. The method of data organization is outlined.
5. The statistical hypotheses are stated.
6. The data analysis is outlined.
7. The precautions taken for accuracy are described.
8. The chapter summary is presented.

Population Description and Sampling Procedures

Students enrolled at Montana State University spring quarter of the academic year 1976-1977 and faculty currently teaching at Montana State University made up the population from which the sample was drawn. There were 8,385 students enrolled at Montana State University and 527 full time faculty members. A random sample of 180 students and 97 faculty members were drawn from the population. The sample was drawn from the students and faculty members as listed in Fussers Guide. The sample from each group was delineated into three subgroups to receive instruments on smoking, alcohol abuse, or inadequate or excessive food consumption.

Description of Investigative Categories

This study attempted to determine how students and faculty members perceived specified primary prevention program measures for the health problems of smoking, alcohol abuse, and inadequate or excessive food consumption. The three instruments were developed from proposed actions listed in the United States Department of Health, Education, and Welfare's Forward Plan for Health publication (1975:100-104). The proposed actions for each health problem were divided into categories of: (1) legislative actions to establish enforcement or regulation procedures, (2) actions requiring behavioral change, (3) incentive

measures, (4) health maintenance measures, (5) areas for further research, and (6) an open ended question to elicit individual response.

Method of Collecting Data

The researcher designed three instruments to determine the perceptions of Montana State University students and faculty members regarding primary prevention program measures for the health problems of smoking, alcohol abuse, and inadequate or excessive food consumption. The instruments, along with a cover letter, were mailed to a random sample of Montana State University students and delivered to a random sample of Montana State University faculty members spring quarter, 1977. A self-addressed, stamped envelope was included in the mailed instruments in which the student respondents returned the instruments. The instruments to faculty members were returned through the on-campus mail system.

Method of Organizing Data

Tables were constructed to answer the questions proposed and to fulfill the purposes of the problem. The tables were constructed to provide information concerning the students' and faculty members' perceptions regarding primary prevention measures for the health problems of smoking, alcohol abuse and inadequate or excessive food consumption. Tables were constructed to indicate the comparison of perceptions of the students and faculty regarding the proposed measures.

Statistical Hypothesis

The questions to be answered by this study suggested the following hypotheses which were tested at the 0.05 level of significance.

1. (H_0) There will be no significant difference between students and faculty regarding the response on the opinionaire concerning prevention measures for the health problem of smoking.

2. (H_0) There will be no significant difference between students and faculty members regarding the responses on the opinionaire concerning prevention measures for the health problem of alcohol abuse.

3. (H_0) There will be no significant difference between students and faculty members regarding the responses on the opinionaire concerning prevention measures for the health problem of excessive or inadequate food consumption.

Analysis of Data

Statistical means and methods were used to test the stated hypotheses. Results from the opinionaire were arranged in tables and the following statistical methods were employed:

1. Numbers and percentages were presented as needed.
2. Frequencies of response were indicated where appropriate.
3. The Chi Square test of independence was used to test the data to determine if a statistically significant correlation existed between the variables.

The five percent level of significance was selected to test the hypotheses.

4. An analysis of the responses of the sample categories were made for the purpose of making inference to a primary preventive health care program for students and faculty at Montana State University.

Precautions Taken for Accuracy

The data compiled from the opinionnaire were double checked to guard against error. The data were analyzed by computer at Montana State University with an appropriate program to eliminate computational errors. The open ended questions were summarized.

Summary

As indicated by the outline of procedures, this study proposed to determine the perceptions of Montana State University students and faculty members regarding primary prevention program measures for the health problems of smoking, alcohol abuse, and inadequate or excessive food consumption. To accomplish the purpose of the study, three appropriate instruments were designed to obtain student and faculty perceptions on the selected health care problems. Each instrument on a specific problem was divided into categories of 1) proposed legislative actions, 2) actions requiring behavioral change, 3) incentive measures, 4) health maintenance measures, 5) areas for further research and 6) open ended question.

The instruments were mailed to a sample of 180 students and delivered to 97 faculty members at Montana State University. The data were compiled and analyzed to test the stated hypotheses. Chi Square test of independence was used to analyze the data at the five percent level of significance. The data were then presented in appropriate tables for drawing conclusions and making recommendations.

Chapter 4

ANALYSIS OF DATA

The purpose of this study was to determine the perceptions of Montana State University students and faculty members regarding primary prevention program measures for the health problems of smoking, alcohol abuse, and inadequate or excessive food consumption. The data and analysis are presented for each of the three questions under investigation.

Tables are presented to analyze each individual item of each opinionaire with regard to differences in perceptions between faculty and students regarding the items under investigation. The tables contain the number and percentages of faculty and students responding to the scale of each item. They also include the calculated value of chi square, the critical value of chi square, the degrees of freedom, the level of significance, the decision made about each item, and comments on the significance or non-significance of each item.

Method of Sampling and Number Sampled

The sample of faculty members was drawn from the faculty teaching at Montana State University spring quarter of the academic year 1976-1977. There were 527 academic year faculty members at Montana State University during spring quarter, 1977. A systematic random sample of 97 faculty members was drawn.

The sample of students was drawn from students attending Montana State University spring quarter of the academic year 1976-1977. There were 8,385 students enrolled at Montana State University during spring quarter, 1977. A systematic random sample of 180 students was drawn.

Table 1 reveals the number of faculty and students who were sent instruments and the number and percentage of returns usable for the purpose of this study, as well as the number and percentages of unusable returns. The returns which were unusable indicated a large number of omitted items.

Table 1. Number and Percent of Faculty, Students and Instruments Involved in the Study

Items	No.	%
Number and % of faculty who were mailed instruments	97	100
Number and % of faculty who returned instruments	63	64.9
Number and % of instruments usable for the purpose of study	60	61.8
Number and % of instruments unusable	3	4.76
Number and % of students who were mailed instruments	180	100
Number and % of students who returned instruments	101	56.1
Number and % of instruments usable for the purpose of study	92	51.1
Number and % of instruments unusable	9	8.9

Data Tabulated

The responses of all faculty and students who completed the three instruments involved in the study were carefully checked and scores for the three instruments were tabulated. These individual scores were combined and computed to establish chi square tables for each question in each individual opinionnaire under investigation. Tables were constructed for each item of each opinionnaire from individual scores obtained by carefully pairing the frequency of responses to each scale item between faculty and students. The tabulated scores were analyzed by an appropriate program of chi square run at Montana State University Mini Stat Center. All of the computed statistical values were compared to the appropriate critical values at the .05 level of significance.

Table 2. Number and Percentage of Students and Faculty Responding to Item #1 on the Alcohol Abuse Opinionnaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	10	50	7	35	2	10	1	5
Students	10	33.33	12	40	6	20	2	6.66

Faculty - N = 20

Students - N = 30

Comparison: Calculated value of $\chi^2 = 1.72$

Critical value of χ^2 , df = 3, = 7.82 at .05 level of significance.

Decision: Retain the null hypothesis.

Comments: There is no significant difference between the perceptions of students and faculty members at Montana State University regarding their degree of agreement with the statement:

1. Develop consistent state and local alcohol control laws oriented towards prevention of abuse.

Table 3. Number and Percentage of Students and Faculty Responding to Item #2 on the Alcohol Abuse Opinionnaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	11	55	5	25	4	20	0	0
Students	18	60	11	36.66	1	3.33	0	0

Faculty - N = 20 Students - N = 30

Comparison: Calculated value of $\chi^2 = 3.90$

Critical value of χ^2 , df = 2, = 5.99 at .05 level of significance

Decision: Retain the null hypothesis

Comments: There is no significant difference between the perceptions of students and faculty members at Montana State University regarding the degree of agreement with the statement:

2. Increase communication between control agencies and those agencies involved with alcohol-related problems.

Table 4. Number and Percentage of Students and Faculty Responding to Item #3 on the Alcohol Abuse Opinionnaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	0	0	4	20	4	20	12	60
Students	2	6.66	7	23.33	8	26.66	13	43.33

Faculty - N = 20

Students - N = 30

Comparison: Calculated value of $\chi^2 = 1.35$

Critical value of χ^2 , df = 2, = 5.99 at .05 level of significance.

Decision: Retain the null hypothesis.

Comments: There is no significant difference between the perceptions of students and faculty members of Montana State University regarding the degree of agreement with the statement.

3. Reduce the alcohol content of certain beverages.

Table 5. Number and Percentage of Students and Faculty Responding to Item #4 on the Alcohol Abuse Opinionnaire

	Strongly Agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	10	50	2	10	6	30	2	10
Students	5	16.66	7	23.33	9	30	9	30

Faculty - N = 20

Students - N = 30

Comparison: Calculated value of $\chi^2 = 7.81$

Critical value of χ^2 , df = 3, = 7.82 at .05 level of significance.

Decision: Retain the null hypothesis

Comments: There is no significant difference between the perceptions of students and faculty members at Montana State University regarding the degree of agreement with the statement:

4. Restrict advertisements for alcoholic beverages.

Table 6. Number and Percentage of Students and Faculty Responding to Item #5 on the Alcohol Abuse Opinionnaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	10	50	3	15	3	15	4	20
Students	8	26.66	7	23.33	6	20	9	30

Faculty - N = 20 Students - N = 30

Comparison: Calculated value of $\chi^2 = 2.86$

Critical value of χ^2 , df = 3, = 7.82 at .05 level of significance.

Decision: Retain the null hypothesis

Comments: There is no significant difference between the perceptions of students and faculty members at Montana State University regarding the degree of agreement with the statement:

5. Exclude advertising for alcoholic beverages as a deductible business expense for tax purposes.

Table 7. Number and Percentage of Students and Faculty Responding to Item #6 on the Alcohol Abuse Opinionnaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	6	30	9	45	1	5	4	20
Students	5	16.66	11	36.66	6	20	8	26.66

Faculty - N = 20

Students - N = 30

Comparison: Calculated value of $\chi^2 = 3.33$

Critical value of χ^2 , df = 3, = 7.82 at .05 level of significance.

Decision: Retain the null hypothesis

Comments: There is no significant difference between the perceptions of students and faculty members at Montana State University regarding the degree of agreement with statement:

6. Adjust the tax rate according to the amount of absolute alcohol in the beverage.

Table 8. Number and Percentage of Students and Faculty Responding to Item #7 on the Alcohol Abuse Opinionnaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	9	45	9	45	0	0	2	10
Students	11	36.66	11	26.66	5	16.66	3	10

Faculty - N = 20

Students - N = 30

Comparison: Calculated value of $\chi^2 = 2.08$

Critical value of χ^2 , df = 2, = 5.99 at .05 level of significance.

Decision: Retain the null hypothesis

Comments: There is no significant difference between the perceptions of students and faculty members at Montana State University regarding the degree of agreement with the statement:

7. Establish a state tax on alcohol sales to fund treatment and research for prevention of alcohol abuse.

Table 9. Number and Percentage of Students and Faculty Responding to Item #8 on the Alcohol Abuse Opinionnaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	7	35	11	55	2	10	0	0
Students	22	73.33	6	20	2	6.66	0	0

Faculty - N = 20

Students - N = 30

Comparison: Calculated values of $\chi^2 = 7.53$

Critical value of χ^2 , $df = 2$, = 5.99 at .05 level of significance.

Decision: Reject the null hypothesis

Comments: There is a significant difference between the perceptions of students and faculty members at Montana State University regarding their degree of agreement with the statement:

8. Develop cooperative educational programs on the limits of responsible drinking, identification of problem drinkers, and availability of community resources.

Table 10, Number and Percentage of Students and Faculty Responding to Item #9 on the Alcohol Abuse Opinionnaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	11	55	7	35	2	10	0	0
Students	19	63.33	10	33.33	1	3.33	0	0

Faculty - N = 20

Students - N = 30

Comparison: Calculated value of $\chi^2 = 1.04$

Critical value of χ^2 , $df = 2$, = 5.99 at .05 level of significance.

Decision: Retain the null hypothesis

Comments: There is no significant difference between the perceptions of students and faculty members at Montana State University regarding their degree of agreement with the statement:

9. Give special support to programs effective in early detection, and to treatment services designed to meet the needs of those in earlier stages of alcohol-related problems.

Table 11. Number and Percentage of Students and Faculty Responding to Item #10 on the Alcohol Abuse Opinionnaire

	Strongly agree		Agree		Disagree		Strongly agree	
	No.	%	No.	%	No.	%	No.	%
Faculty	15	75	5	25	0	0	0	0
Students	18	60	11	36.66	1	3.33	0	0

Faculty - N = 20

Students - N = 30

Comparison: Calculated value of $\chi^2 = 1.20$

Critical value of χ^2 , $df = 1$, = 3.84 at .05 level of significance.

Decision: Retain the null hypothesis.

Comments: There is no significant difference between the perceptions of students and faculty members at Montana State University regarding their degree of agreement with the statement:

10. Conduct research to establish greater understanding of the relationship of alcohol use to pregnancy and fetal health.

Table 12. Number and Percentage of Students and Faculty Responding to Item #11 on the Alcohol Abuse Opinionnaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	17	85	3	15	0	0	0	0
Students	16	53.33	11	36.66	3	10	0	0

Faculty - N = 20

Students - N = 30

Comparison: Calculated value of $\chi^2 = 5.36$

Critical value of χ^2 , df = 1, = 3.84 at .05 level of significance.

Decision: Reject the null hypothesis

Comments: There is a significant difference between the perceptions of students and faculty members at Montana State University regarding their degree with the statement:
11. Conduct research to establish greater understanding of the relationship of genetic and environmental influences on the additive process of alcohol use.

Table 13. Number and Percentage of Students and Faculty Responding to Item #12 on the Alcohol Abuse Opinionnaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	11	55	9	45	0	0	0	0
Students	18	60	10	33.33	2	6.66	0	0

Faculty - N = 20

Students - N = 30

Comparison: Calculated value of $\chi^2 = .12$

Critical value of χ^2 , $df = 1$, = 3.84 at .05 level of significance.

Decision: Retain the null hypothesis

Comments: There is no significant difference between the perceptions of students and faculty members at Montana State University regarding their degree of agreement with the statement:

12. Develop more effective health education methods suitable to the field of alcohol abuse.

Table 14. Number and Percentage of Students and Faculty Responding to Item #13 on the Alcohol Abuse Opinionnaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	9	45	11	55	0	0	0	0
Students	23	76.66	7	23.33	0	0	0	0

Faculty - N = 20 Students - N = 30

Comparison: Calculated value of $\chi^2 = 5.22$

Critical value of χ^2 , df = 1, = 3.84 at .05 level of significance.

Decision: Reject the null hypothesis

Comments: There is a significant difference between the perceptions of students and faculty members at Montana State University regarding their degree of agreement with the statement:

13. Target special educational efforts at school children, health professionals, and children of alcoholic parents.

Summary of Responses to Item #14 on the
Alcohol Abuse Opinionnaire

14. Please indicate your suggestions for the prevention of alcohol abuse on the lines provided below.

The majority of the student respondents to this item emphasized the importance of education from elementary school levels to adult education. Some representative quotes were:

- a. "The most important thing in prevention is education."
- b. "Parents are the predominant problem. Alcohol abuse prevention should start at home. Perhaps an adult education program would work better."
- c. "Health education in the elementary schools has received less attention in the past years due to so many other demands on school time."

Several respondents suggested that social pressures such as peer group influences should be studied. Some students advocated raising the legal age for liquor sales to 19 years of age.

From the faculty, the majority of the respondents favored a change in the social attitudes toward the use of alcohol. Some quotes from the faculty were:

- a. "Provide alternate avenues of 'escape'. Utilize to better and greater extent those remedies such as spiritual help."
- b. "For many people, alcohol is a social crutch, escapist device, or has other psychological or social indications. We really ought to know why people inhabit bars, insist on alcohol at parties or on hunting trips, or require alcohol with their meals."

Table 15. Number and Percentage of Students and Faculty Responding to Item #1 on the Inadequate of Excessive Food Consumption Opinionaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	13	65	2	10	4	25	0	0
Students	15	50	8	26.66	6	20	1	3.33

Faculty - N = 20

Students - N = 30

Comparison: Calculated value of $\chi^2 = 2.16$

Critical value of χ^2 , $df = 2$; = 5.99 at .05 level of significance

Decision: Retain the null hypothesis

Comments: There is no significant difference between the perceptions of students and faculty members at Montana State University regarding their degree of agreement with the statement:

1. Expand efforts to monitor and analyze the nutrient composition of foods and of potentially harmful substances in food.

Table 16. Number and Percentage of Students and Faculty Responding to Item #2 on the Inadequate or Excessive Food Consumption Opinionnaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	9	45	3	15	6	30	2	10
Students	9	30	8	26.66	10	33.33	3	10

Faculty - N = 20

Students - N = 30

Comparison: Calculated value of $\chi^2 = 1.53$

Critical value of χ^2 , df = 1, = 3.84 at .05 level of significance.

Decision: Retain the null hypothesis

Comments: There is no significant difference between the perceptions of students and faculty members at Montana State University regarding their degree of agreement with the statement:

2. Develop strong regulations to control the advertisement of food products, especially those of high sugar content or little nutritive value.

Table 17. Number and Percentage of Students and Faculty Responding to Item #3 on the Inadequate or Excessive Food Consumption Opinionnaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	13	65	6	30	1	5	0	0
Students	19	63.33	10	33.33	1	3.33	0	0

Faculty - N = 20

Students - N = 30

Comparison: Calculated value of $\chi^2 = .13$

Critical value of χ^2 , df = 3, = 7.82 at .05 level of significance.

Decision: Retain the null hypothesis

Comments: There is no significant difference between the perceptions of students and faculty members at Montana State University regarding their degree of agreement with the statement:

3. Establish strict regulations concerning food labeling, and require full disclosure of contents.

Table 18. Number and Percentage of Students and Faculty Responding to Item #4 on the Inadequate or Excessive Food Consumption Opinionnaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	4	20	10	50	3	15	3	15
Students	8	26.66	10	33.33	10	33.33	2	6.66
Faculty - N = 20			Students - N = 30					

Comparison: Calculated value of $\chi^2 = 3.44$

Critical value of χ^2 , $df = 3$, = 7.82 at .05 level of significance.

Decision: Retain the null hypothesis

Comments: There is no significant difference between the perceptions of students and faculty members at Montana State University regarding their degree of agreement with the statement:

4. Base life and health insurance premiums on weight standards, with higher premiums for those significantly in excess of their ideal weight.

Table 19. Number and Percentage of Students and Faculty Responding to Item #5 on the Inadequate or Excessive Food Consumption Opinionnaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	12	60	7	35	1	5	0	0
Students	14	46.66	15	50	0	0	1	3.33

Faculty - N = 20

Students - N = 30

Comparison: Calculated value of $\chi^2 = .853$

Critical value of χ^2 , df = 1, = 3.84 at .05 level of significance.

Decision: Retain the null hypothesis

Comments: There is no significant difference between the perceptions of students and faculty members at Montana State University regarding their degree of agreement with the statement:

5. Develop nutrition education programs to help the public at large and special high risk populations to select suitable foods.

Table 20. Number and Percentage of Students and Faculty Responding to Item #6 on the Inadequate or Excessive Food Consumption Opinionaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	8	40	8	40	2	10	2	10
Students	10	33.33	18	60	2	6.66	0	0

Faculty - N = 20

Students - N = 30

Comparison: Calculated value of $\chi^2 = 2.85$

Critical value of χ^2 , df = 2, = 5.99 at .05 level of significance.

Decision: Retain the null hypothesis

Comments: There is no significant difference between the perceptions of students and faculty members at Montana State University regarding their degree of agreement with the statement:

6. Strengthen monitoring activities to establish nutritional status, eating habits, and relationships of consumption to various health states.

Table 21. Number and Percentage of Students and Faculty Responding to Item #7 on the Inadequate or Excessive Food Consumption Opinionnaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	10	50	6	30	4	20	0	0
Students	16	53.33	10	33.33	3	10	1	3.33

Faculty - N = 20

Students - N = 30

Comparison: Calculated value of $\chi^2 = .40$

Critical value of χ^2 , $df = 2$, = 5.99 at .05 level of significance.

Decision: Retain the null hypothesis

Comments: There is no significant difference between perceptions of students and faculty members at Montana State University regarding their degree of agreement with the statement:

7. Focus research on explicating the role of nutrition in the prevention of disease.

Table 22. Number and Percentage of Students and Faculty Responding to Item #8 on the Inadequate or Excessive Food Consumption Opinionaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	12	60	7	35	1	5	0	0
Students	14	46.66	12	40	4	13.33	0	0

Faculty - N = 20

Students - N = 30

Comparison: Calculated value of $\chi^2 = 1.32$

Critical value of χ^2 , df = 2, = 5.99 at the .05 level of significance.

Decision: Retain the null hypothesis

Comments: There is no significant difference between the perceptions of students and faculty members at Montana State University regarding their degree of agreement with the statement:

8. Determine the actual nutrient requirements of man.

Table 23. Number and Percentage of Students and Faculty Responding to Item #9 on the Inadequate or Excessive Food Consumption Opinionnaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	13	65	6	30	1	5	0	0
Students	16	53.33	12	40	1	3.33	1	3.33

Faculty - N = 20

Students - N = 30

Comparison: Calculated value of $\chi^2 = .67$

Critical value of χ^2 , $df = 2$, = 5.99 at the .05 level of significance.

Decision: Retain the null hypothesis

Comments: There is no significant difference between the perceptions of students and faculty members at Montana State University regarding their degree of agreement with the statement:

9. Determine the behavioral aspects of nutrition.

Table 24. Number and Percentage of Students and Faculty Responding to Item #10 on the Inadequate or Excessive Food Consumption Opinionnaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	11	55	5	25	4	20	0	0
Students	8	26.66	15	50	7	23.33	0	0

Faculty - N = 20

Students - N = 30

Comparison: Calculated value of $\chi^2 = 4.47$

Critical value of χ^2 , df = 2, = 5.99 at the .05 level of significance.

Decision: Retain the null hypothesis

Comments: There is no significant difference between the perceptions of students and faculty members at Montana State University regarding their degree of agreement with the statement:

10. Investigate methods of appraising nutritional status.

Table 25. Number and Percentage of Students and Faculty Responding to Item #11 on the Inadequate or Excessive Food Consumption Opinionaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	10	50	6	30	3	15	1	5
Students	10	33.33	12	40	7	23.33	1	3.33

Faculty - N = 20

Students - N = 30

Comparison: Calculated value of $\chi^2 = 1.67$

Critical value of χ^2 , df = 3, = 7.82 at the .05 level of significance.

Decision: Retain the null hypothesis

Comments: There is no significant difference between the perceptions of students and faculty members at Montana State University regarding their degree of agreement with the statement:

11. Conduct research to determine more effective educational methodologies.

Summary of Responses to Item #12 on the
Inadequate or Excessive Food Consumption Opinionnaire

12. Please indicate your suggestions for the prevention of inadequate or excessive food consumption on the lines provided below.

The majority of the student respondents to this item on the opinionnaire felt that education was at least one answer to the problem. Some quotes that were representative were:

a. "We should devise programs to better inform the public on the nutritional value of foods. Teach what the good foods are and how much to eat. Discourage the use of fad diets and tell which ones are good or suitable to use."

b. "Better education into proper nutritional practices and the effects of foods."

c. "The idea of education is a very good one. If through advertising you could suggest better, more nutritional foods to consume it might cause people to watch their diets for these foods."

Some students felt that legislation was a partial solution to the problem of nutrition. Some quotes from these respondents were:

a. "Place restrictions on big business who control the market. I believe they are taking short cuts in nutrition to cut costs."

b. "Increase the price of junk foods or foods that have no nutritional value. Better yet, take these foods off the market."

Likewise, the majority of faculty responses to this item on the opinionnaire dealt with public education. Some quotes that were representative were:

a. "It is going to require 2 or 3 generations of education to alter food consumption especially in the privileged nations."

b. "Good educational programs over TV or other mass media."

c. "Emphasis should be placed on educating parents of the importance of infant diets and the development of proper eating habits in children."

d. "Federal, state, and local funds need to be appropriated to develop educational delivery systems of nutritional information to specific groups as well as the general public. These delivery systems could be through a variety of agencies, however, the team approach which capitalized on several professional's expertise would maximize the results."

Table 26. Number and Percentage of Students and Faculty Responding to Item #1 on the Smoking Opinionnaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	7	35	10	50	3	15	0	0
Students	16	50	11	34.37	4	12.5	1	3.125

Faculty - N = 20

Students - N = 33

Comparison: Calculated value of $\chi^2 = 1.37$

Critical value of χ^2 , $df = 2$, = 5.99 at the .05 level of significance.

Decision: Retain the null hypothesis

Comments: There is no significant difference between the perceptions of students and faculty members at Montana State University regarding their degree of agreement with the statement:

1. Make the warning label on cigarette packages more explicit about the disease risks.

Table 27. Number and Percentage of Students and Faculty Responding to Item #2 on the Smoking Opinionnaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	8	40	10	50	2	10	0	0
Students	15	46.875	8	25	8	25	1	3.125

Faculty - N = 20

Students - N = 32

Comparison: Calculated value of $\chi^2 = 4.27$

Critical value of χ^2 , df = 2, = 5.99 at .05 level of significance.

Decision: Retain the null hypothesis

Comments: There is no significant difference between the perceptions of students and faculty members at Montana State University regarding their degree of agreement with the statement:

2. Make the regulations more specific concerning the size and prominence of the warning statement in advertising.

Table 28. Number and Percentage of Students and Faculty Responding to Item #3 on the Smoking Opinionnaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	6	30	9	45	2	10	3	15
Students	19	59.37	7	21.875	3	9.375	3	6.25

Faculty - N = 20

Students - N = 32

Comparison: Calculated value of $\chi^2 = 5.28$

Critical value of χ^2 , df = 3, = 7.82 at the .05 level of significance.

Decision: Retain the null hypothesis

Comments: There is no significant difference between the perceptions of students and faculty members at Montana State University regarding their degree of agreement with the statement:

3. Restrict the sale of cigarettes with high tar and nicotine content.

Table 29. Number and Percentage of Students and Faculty Responding to Item #4 on the Smoking Opinionnaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	14	70	4	20	2	10	0	0
Students	24	75	4	12.5	4	13.5	0	0

Faculty - N = 20

Students - N = 32

Comparison: Calculated value of $\chi^2 = .56$

Critical value of χ^2 , df = 2, = 5.99 at the .05 level of significance.

Decision: Retain the null hypothesis

Comments: There is no significant difference between the perceptions of students and faculty members at Montana State University regarding their degree of agreement with the statement:

4. Phase out tobacco price supports and eliminate cigarette from the "Food for Peace" Program.

Table 30. Number and Percentage of Students and Faculty Responding to Item #5 on the Smoking Opinionnaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	14	70	2	10	3	15	1	5
Students	20	62.5	9	28.125	3	9.375	0	0

Faculty - N = 20

Students - N = 32

Comparison: Calculated value of $\chi^2 = 3.05$

Critical value of χ^2 , $df = 2$, = 5.99 at the .05 level of significance.

Decision: Retain the null hypothesis

Comments: There is no significant difference between the perceptions of students and faculty members at Montana State University regarding their degree of agreement with the statement:

5. Ban cigarette advertisements or exclude such advertising as a deductible business expense for tax purposes.

Table 31. Number and Percentage of Students and Faculty Responding to Item #6 on the Smoking Opinionnaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	11	55	5	25	1	5	3	15
Students	20	62.5	6	18.75	4	12.5	2	6.25

Faculty - N = 20 Students - N = 32

Comparison: Calculated value of $\chi^2 = 2.04$

Critical value of χ^2 , df = 3, = 7.82 at the .05 level of significance.

Decision: Retain the null hypothesis

Comments: There is no significant difference between the perceptions of students and faculty members at Montana State University regarding their degree of agreement with the statement:

6. Encourage the Federal Trade Communications Commission to require that prime time be available for anti-smoking spots on television and radio.

Table 32. Number and Percentage of Students and Faculty Responding to Item #7 on the Smoking Opinionnaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	13	65	4	20	3	15	0	0
Students	21	65.62	8	25	2	6.75	1	3.125

Faculty - N = 20

Students - N = 32

Comparison: Calculated value of $\chi^2 = .47$

Critical value of χ^2 , $df = 2$, = 5.99 at the .05 level of significance.

Decision: Retain the null hypothesis

Comments: There is no significant difference between the perceptions of students and faculty members at Montana State University regarding their degree of agreement with the statement:

7. Conduct anti-smoking campaigns, particularly for such target groups as youth, women, adults with high risk of disease.

Table 33. Number and Percentage of Students and Faculty Responding to Item #8 on the Smoking Opinionnaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	15	75	5	25	0	0	0	0
Students	27	84.375	5	15.625	0	0	0	0
Faculty - N = 20		Students - N = 32						

Comparison: Calculated value of $\chi^2 = .70$

Critical value of χ^2 , $df = 1$, = 3.84 at the .05 level of significance.

Decision: Retain the null hypothesis

Comments: There is no significant difference between the perceptions of students and faculty members at Montana State University regarding their degree of agreement with the statement:

8. Conduct health education programs in school to emphasize the dangers of smoking, especially for elementary school students.

Table 34. Number and Percentage of Students and Faculty Responding to Item #9 on the Smoking Opinionnaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	7	35	9	45	2	10	2	10
Students	17	53.125	12	37.5	2	6.25	1	3.125

Faculty - N = 20

Students - N = 32

Comparison: Calculated value of $\chi^2 = 2.28$

Critical value of χ^2 , df = 3, = 7.82 at the .05 level of significance.

Decision: Retain the null hypothesis

Comments: There is no significant difference between the perceptions of students and faculty members at Montana State University regarding their degree of agreement with the statement:

9. Establish free programs to aid those who are trying to give up smoking.

Table 35. Number and Percentage of Students and Faculty Responding to Item #10 on the Smoking Opinionnaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	9	45	6	30	2	10	3	15
Students	11	43.75	11	34.375	6	18.75	1	3.125

Faculty - N = 20

Students - N = 32

Comparison: Calculated value of $\chi^2 = 2.95$

Critical value of χ^2 , $df = 3$, = 7.82 at the .05 level of significance.

Decision: Retain the null hypothesis

Comments: There is no significant difference between the perceptions of students and faculty members at Montana State University regarding their degree of agreement with the statement:

10. Raise the Federal excise tax on all cigarettes.

Table 36. Number and Percentage of Students and Faculty Responding to Item #11 on the Smoking Opinionnaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	4	20	6	30	4	20	6	30
Students	11	34.375	11	34.375	9	28.125	1	3.125

Faculty - N = 20

Students - N = 32

Comparison: Calculated value of $\chi^2 = 7.88$

Critical value of χ^2 , df = 3, = 7.82 at the .05 level of significance.

Decision: Reject the null hypothesis

Comments: There is a significant difference between the perceptions of students and faculty members at Montana State University regarding their degree of agreement with the statement:

11. Raise the Federal excise tax on cigarettes differentially based on the level of tar and nicotine content.

Table 37. Number and Percentage of Students and Faculty Responding to Item #12 on the Smoking Opinionnaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	4	20	5	25	7	35	4	20
Students	19	59.375	10	31.25	2	6.25	1	3.125

Faculty - N = 20

Students - N = 32

Comparison: Calculated value of $\chi^2 = 14$

Critical value of χ^2 , $df = 3$, = 7.82 at the .05 level of significance.

Decision: Reject the null hypothesis

Comments: There is a significant difference between the perceptions of students and faculty members at Montana State University regarding their degree of agreement with the statement:

12. Establish a state tax on tobacco sales to fund treatment and research programs for prevention of smoking.

Table 38. Number and Percentage of Students and Faculty Responding to Item #13 on the Smoking Opinionnaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	5	25	2	10	6	30	7	35
Students	8	25	12	37.5	7	21.875	5	15.625

Faculty - N = 20

Students - N = 32

Comparison: Calculated value of $\chi^2 = 5.78$

Critical value of χ^2 , df = 3, = 7.82 at the .05 level of significance.

Decision: Retain the null hypothesis

Comments: There is no significant difference between the perceptions of students and faculty members at Montana State University regarding their degree of agreement with the statement:

13. Expand efforts to develop a cigarette substitute or a safe cigarette.

Table 39. Number and Percentage of Students and Faculty Responding to Item #14 on the Smoking Opinionnaire

	Strongly agree		Agree		Disagree		Strongly disagree	
	No.	%	No.	%	No.	%	No.	%
Faculty	10	50	6	30	2	10	2	10
Students	18	56.25	9	38.125	4	12.5	1	3.125

Faculty - N = 20

Students - N = 32

Comparison: Calculated value of $\chi^2 = 1.18$

Critical value of χ^2 , df = 3, = 7.82 at the .05 level of significance.

Decision: Retain the null hypothesis

Comments: There is no significant difference between the perceptions of students and faculty members at Montana State University regarding their degree of agreement with the statement:

14. Conduct further research on techniques to assist people to stop smoking.

Summary of Responses to Item #15
on the Smoking Opinionnaire

15. Please indicate your suggestions for the prevention of smoking on the lines provided below.

Of the student respondents who advocated educational programs to prevent smoking, all indicated the programs aimed at young children would be most effective. Some representative quotes were:

- a. "I agree especially with education in the school system."
- b. "Health education and stop smoking programs are the best bet as far as the youth and young adults are concerned."
- c. "I think that education done in an honest and fair method of representation would be most effective. Education for the very young seems important."

Some of the students looked to legislation to help prevent smoking such as increased tax rates for cigarettes, federal or state restrictions against smoking in specified public areas such as "planes, buses, restaurants, hospitals," and banning cigarettes from the market.

Other students advocated a change in personal habits for smokers. Some of these comments were:

- a. "Stop the cues that tell smokers to light up."
- b. "They could occupy themselves with books, magazines, or they could chew gum."

Many of the faculty respondents also suggested education of young people as a preventive measure for smoking. A typical response was:

"Education of young people who have not yet acquired the habit would be the best solution."

Several faculty members advocated more research to document why people smoke and attack the underlying problem. Other faculty respondents view peer group pressure as most important in the development of smoking habits and suggested more research in the behavioral sciences to counteract this peer influence.

Summary

In general, faculty and students were in agreement concerning the items on the opinionnaires. The areas of disagreement were with the amount of agreement or disagreement rather than dichotomy. However, on the items concerning taxes to be placed on cigarettes, the faculty was against it and the students supported the tax.

There was a greater amount of agreement between faculty and students on the items which dealt with education of both the general public as well as school children on all three of the opinionnaires.

Comments by the respondents on the open questions generally recognized the importance of education for helping with the problems of smoking, alcohol abuse and nutrition. Some of these responses were of a very determined nature, some were of a defensive nature, and some were of despair that society would never come up with a solution to these problems.

Chapter 5

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

This study was an effort to ascertain the perceptions of students and faculty regarding selected health care practices at Montana State University. The need for the research was based on the economic problems of individuals and families caused by chronic illness resulting from poor health care practices. The need was also based on the assumption that the health care system should shift from being sickness oriented to being prevention care oriented.

This study was developed in the following manner. A review of literature was made to provide a background for the study. The review of literature analyzed the aspects of health care practices in regard to the prevention care orientation. The review pointed out that there are a number of difficult problems and choices to be clarified by the health care delivery workers as well as the consumers. The review also revealed that by working together and assuming joint responsibility, the health care worker and consumer might begin to find solutions to the problems of preventative health care measures.

From the information elicited in the review of relevant research, three survey opinionnaires were developed to gather data concerning faculty and students' perceptions on items dealing with smoking, alcohol abuse, and nutrition. The instruments were based on

the related literature and research done in the areas of identifying practices to educate and inform the public of ways to solve these problems.

The instruments, along with a cover letter, were sent to a random sample of faculty and students at Montana State University during the spring of 1977. The responses of all faculty and students who completed the instruments on smoking, alcohol abuse, and nutrition were carefully checked and frequency scores for each instrument were paired and tabulated. The entire set of tabulated scores for each instrument was analyzed by an appropriate program of chi square run at the Mini Stat Lab at Montana State University.

Results from the three opinionnaires were arranged in tables and the following statistical methods were employed:

1. Numbers and percentages were presented as needed.
2. Frequency of response was indicated where appropriate.
3. Chi square was used to test the data to determine if a statistically significant difference existed between the perceptions of students and faculty on the variables.
4. The five percent level of significance was selected to test the hypothesis of the study.

Tables were presented to show and compare the number and percentages of responses to each item on each opinionnaire. The tables also contained the calculated value of chi square, the critical value

of chi square, the degrees of freedom, and the level of significance. Each table was followed by a decision on the null hypothesis and comments on the significance or lack of significance for each item.

The analysis of data pointed out that there was a relatively high level of agreement between faculty and students at Montana State University regarding the items on the opinionnaires.

Conclusions

There was a significant difference between the perceptions of students and faculty on item #8 (Table 9) of the Alcohol Abuse Opinionnaire. This difference, however, was only in distribution of perceptions since 35% of the faculty strongly agreed and 55% agreed and only 10% disagreed, while 73.33% of the students strongly agreed, 20% agreed, and only 6.66% disagreed. Therefore, the students and faculty agreed that it was important to develop cooperative educational programs on the limits of responsible drinking, identification of problem drinkers, and the availability of community resources, but only differed on the distribution of perceptions in the same direction to which they agreed.

There was a significant difference between the perceptions of students and faculty on item #11 (Table 12) of the alcohol abuse opinionnaire. This difference, however, was once again only in degree since 85% of the faculty strongly agreed, 15% agreed, and none

disagreed, while 53.33% of the students strongly agreed, 36.66% agreed and only 10% disagreed. Therefore, in general, there was agreement that it was important to conduct research to establish greater understanding of the relationship of genetic and environmental influences on the addictive process of alcohol use. The difference that did occur was due to the degree to which they agreed.

In general, then, on the opinionnaire concerning alcohol abuse, there was no significant difference in the perceptions of faculty and students regarding the opinionnaire items. Faculty and students agreed on the desirability to:

1. Develop consistent state and local alcohol content laws oriented toward prevention of abuse.
2. Increase communication between control agencies and those agencies involved with alcohol related problems.
3. Exclude advertising for alcoholic beverages as a tible business expense for tax purposes.
4. Adjust the tax rate according to the amount of absolute alcohol in the beverage.
5. Establish a state tax on alcohol sales to fund treatment and research for prevention of alcohol abuse.
6. Develop cooperative educational programs on the limits of responsible drinking, identification of problem drinkers, and availability of community resources.
7. Give special support to programs effective in early detection, and to treatment services designed to meet the needs of those in earlier stages of alcohol related problems.
8. Conduct research to establish greater understanding of the relationship of alcohol use to pregnancy and fetal health.

9. Conduct research to establish greater understanding of the relationship of genetic and environmental influences on the addictive process of alcohol use.

10. Develop more effective health education methods suitable to the field of alcohol abuse.

11. Target special educational efforts at school children, health professionals, and children of alcoholic parents.

Faculty and students disagreed on the desirability to:

Reduce the alcohol content of certain beverages.

Faculty and students differed on the desirability to:

Restrict advertisements for alcoholic beverages.

The majority of students disagreed with this item, while the majority of faculty agreed with it. However, the difference was not statistically significant.

There was no significant difference between the perceptions of students and faculty regarding the items on the nutrition opinionnaire. Therefore, the null hypothesis was retained and students and faculty saw each item in relatively the same way. Faculty and students agreed on the desirability to:

1. Expand efforts to monitor and analyze the nutrient composition of foods and of potentially harmful substances in food.

2. Develop strong regulations to control the advertisement of products, especially those of high sugar content or little nutritive value.

3. Establish strict regulations concerning food labeling, and require full disclosure of contents.

4. Base life and health insurance premiums on weight standards, with higher premiums for those significantly in excess of their ideal weight.

5. Develop nutrition education programs to help the public at large and special high risk populations to select suitable foods.

6. Strengthen monitoring activities to establish nutritional status, eating habits, and relationship of consumption to various health states.

7. Focus research on explicating the role of nutrition in the prevention of disease.

8. Determine the actual nutrient requirements of man.

9. Determine the behavioral aspects of nutrition.

10. Investigate methods of appraising nutritional status.

11. Conduct research to determine more effective educational methodologies.

There was a significant difference between the perceptions of students and faculty regarding item #11 (Table 36) of the smoking opinionnaire. The majority of students felt it desirable to raise the federal excise tax on cigarettes differentially based on the level of tar and nicotine content, while there was an even split on the faculty response.

There was a significant difference between the perceptions of students and faculty regarding item #12 (Table 37) of the smoking opinionnaire. The majority of students felt it desirable to establish a state tax on tobacco sales to fund treatment and research programs for the prevention of smoking while the majority of faculty did not.

In general, on the opinionnaire concerning smoking, there was no significant difference in the perceptions of the faculty and students regarding opinionnaire items. Faculty and students agreed on the desirability to:

1. Make the warning label on cigarette packages more explicit about the disease risks.
2. Make the regulations more specific concerning the size and prominence of the warning statement in advertising.
3. Restrict the sale of cigarettes with high tar and nicotine content.
4. Phase out tobacco price supports and eliminate cigarettes from the "Food for Peace" Program.
5. Ban cigarette advertisements or exclude such advertising as a deductible business expense for tax purposes.
6. Encourage the Federal Trade Communications Commission to require that prime time be available for anti-smoking spots on television and radio.
7. Conduct anti-smoking campaigns, particularly for such target groups as youth, women, adults with high risk of disease.
8. Conduct health education programs to emphasize the dangers of smoking in school, especially for elementary school students.
9. Establish free programs to aid those who are trying to give up smoking.
10. Raise the Federal excise tax on all cigarettes.
11. Conduct further research on techniques to assist people to stop smoking.

Faculty and students differed on the desirability to:

Expand efforts to develop a cigarette substitute or a safe cigarette.

The difference, however, was not statistically significant.

The majority of faculty thought it would not be a good idea and the majority of students thought it would be a good idea.

Recommendations

In view of the conclusions of this study, the following recommendations are proposed:

1. The students and faculty of Montana State University should utilize their lobbying strength at the state level to support:
 - a. Consistent legislation aimed at alcohol control laws oriented toward prevention of abuse.
 - b. Exclusion of advertising for alcoholic beverages and/or cigarettes as a deductible business expense for tax purposes.
 - c. Establishment of a state tax on alcohol sales to fund treatment and research for prevention of alcohol abuse programs.
 - d. Restriction on the sale of cigarettes with high tar and nicotine content.
2. A program should be established on the campus of Montana State University to develop methods to aid the faculty and students who are interested in giving up smoking.

3. A nutritional program should be established on campus to aid the students and faculty to select suitable diets.

4. A program should be established on the campus of Montana State University for students and faculty regarding the limits of responsible drinking and methods of identifying problem drinkers and the community resources available for alcohol related problems.

5. Further study should be done regarding effective health education methods suitable for the prevention of alcohol abuse and smoking.

6. Further research is recommended to clarify the nutritional aspects of disease prevention.

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APPENDIXES

APPENDIX A

OPINIONAIRE ON THE PREVENTION OF SMOKING

OPINIONAIRE ON THE PREVENTION OF SMOKING

most items from U.S. Department of Health,
Education, and Welfare, Forward Plan for
Health. P.H.S. Publication, June, 1975.

Directions:

The following statements represent health care practices for the prevention of smoking. As a health care consumer, please indicate your agreement or disagreement with the statements listed.

Example:

Peer group support is the most important factor in the prevention of smoking. If you strongly agree with this statement, you would circle "1".

strong agreement			strong disagreement
(1)	2	3	4

Statements:

	strong agreement			strong disagreement
1. Make the warning label on cigarette packages more explicit about the disease risks.	1	2	3	4
2. Make the regulations more specific concerning the size and prominence of the warning statement in advertising.	1	2	3	4
3. Restrict the sale of cigarettes with high tar and nicotine content.	1	2	3	4
4. Phase out tobacco price supports and eliminate cigarettes from the "Food for Peace" Program.	1	2	3	4
5. Ban cigarette advertisements or exclude such advertising as a deductible business expense for tax purposes.	1	2	3	4
6. Encourage the Federal Trade Communications Commission to require that prime time be available for anti-smoking spots on television and radio.	1	2	3	4
7. Conduct anti-smoking campaigns, particularly for such target groups as youth, women, adults with high risk of disease.	1	2	3	4

Statements:	strong agreement		strong disagreement	
8. Conduct health education programs to emphasize the dangers of smoking in school, especially for elementary school students.	1	2	3	4
9. Establish free programs to aid those who are trying to give up smoking.	1	2	3	4
10. Raise the Federal excise tax on all cigarettes.	1	2	3	4
11. Raise the Federal excise tax on cigarettes differentially based on the level of tar and nicotine content.	1	2	3	4
12. Establish a state tax on tobacco sales to fund treatment and research programs for prevention of smoking.	1	2	3	4
13. Expand efforts to develop a cigarette substitute or a safe cigarette.	1	2	3	4
14. Conduct further research on techniques to assist people to stop smoking.	1	2	3	4
15. Please indicate your suggestions for the prevention of smoking on the lines provided below.				

APPENDIX B

OPINIONAIRE ON THE PREVENTION OF INADEQUATE
OR EXCESSIVE FOOD CONSUMPTION

OPINIONAIRE ON THE PREVENTION OF INADEQUATE OR
EXCESSIVE FOOD CONSUMPTION

most items from U.S. Department of Health,
Education, and Welfare, Forward Plan for
Health. P.H.S. Publication, June, 1975.

Directions:

The following statements represent health care practices for the prevention of inadequate or excessive food consumption. As a health care consumer, please indicate your agreement or disagreement with the statements listed.

Example:

	strong agreement			strong disagreement
Family behavior patterns are the most important factors in the prevention of excessive food consumption.	①	2	3	4

If you strongly agree with this statement, you would circle "1".

Statements:

	strong agreement			strong disagreement
1. Expand efforts to monitor and analyze the nutrient composition of foods and of potentially harmful substances in food.	1	2	3	4
2. Develop strong regulations to control the advertisement of food products, especially those of high sugar content or little nutritive value.	1	2	3	4
3. Establish strict regulations concerning food labeling, and require full disclosure of contents.	1	2	3	4
4. Base life and health insurance premiums on weight standards, with higher premiums for those significantly in excess of their ideal weight.	1	2	3	4
5. Develop nutrition education programs to help the public at large and special high risk populations to select suitable foods.	1	2	3	4
6. Strengthen monitoring activities to establish nutritional status, eating habits, and relationship of consumption to various health states.	1	2	3	4
7. Focus research on explicating the role of nutrition in the prevention of disease.	1	2	3	4

Statements:	strong		strong	
	agreement		disagreement	
8. Determine the actual nutrient requirements of man.	1	2	3	4
9. Determine the behavioral aspects of nutrition.	1	2	3	4
10. Investigate methods of appraising nutritional status.	1	2	3	4
11. Conduct research to determine more effective educational methodologies.	1	2	3	4
12. Please indicate your suggestions for the prevention of inadequate or excessive food consumption on the lines provided below.				

APPENDIX C

OPINIONAIRE ON THE PREVENTION OF ALCOHOL ABUSE

OPINIONAIRE ON THE PREVENTION OF ALCOHOL ABUSE

most items from U.S. Department of Health,
Education, and Welfare, Forward Plan for
Health. P.H.S. Publication, June, 1975.

Directions:

The following statements represent health care practices for the prevention of alcohol abuse. As a health care consumer, please indicate your agreement or disagreement with the statements listed.

Example:

	strong agreement		strong disagreement
Peer group support is the most important factor in the prevention of alcohol abuse.	①	2	3 4
If you strongly agree with this statement, you would circle "1".			

Statements:

	strong agreement		strong disagreement
1. Develop consistent state and local alcohol control laws oriented towards prevention of abuse.	1	2	3 4
2. Increase communication between control agencies and those agencies involved with alcohol-related problems.	1	2	3 4
3. Reduce the alcohol content of certain beverages.	1	2	3 4
4. Restrict advertisements for alcoholic beverages.	1	2	3 4
5. Exclude advertising for alcoholic beverages as a deductible business expense for tax purposes.	1	2	3 4
6. Adjust the tax rate according to the amount of absolute alcohol in the beverage.	1	2	3 4
7. Establish a state tax on alcohol sales to fund treatment and research for prevention of alcohol abuse.	1	2	3 4
8. Develop cooperative educational programs on the limits of responsible drinking, identification of problem drinkers, and availability of community resources.	1	2	3 4
9. Give special support to programs effective in early detection, and to treatment services designed to meet the needs of those in earlier stages of alcohol-related problems.	1	2	3 4

Statements:	strong agreement	strong disagreement				
10. Conduct research to establish greater understanding of the relationship of alcohol use to pregnancy and fetal health.	1	2	3	4		
11. Conduct research to establish greater understanding of the relationship of genetic and environmental influences on the addictive process of alcohol use.	1	2	3	4		
12. Develop more effective health education methods suitable to the field of alcohol abuse.	1	2	3	4		
13. Target special educational efforts at school children, health professionals, and children of alcoholic parents.	1	2	3	4		
14. Please indicate your suggestions for the prevention of alcohol abuse on the lines provided below.						

APPENDIX D

LETTERS

108 A Julia Martin Drive
Bozeman, Montana 59715
April 14, 1977

Dear M.S.U. student:

Today the people of the United States are increasingly interested in good health. Alcohol abuse appears to be a significant factor in contributing to chronic illness in America. A study sponsored by the School of Nursing at Montana State University is being conducted to determine student perceptions of certain factors related to the prevention of alcohol abuse and how they may be related to a primary prevention program. This study will be included in a thesis under the direction of Dr. Laura Walker, Professor of Nursing of Montana State University School of Nursing.

To enable the researcher to obtain an accurate picture, it is important that a high percentage of responses from students be obtained. Your support and cooperation are asked in making this study a success. Being a fellow student, I realize the demands being made on your time. However, if you would take time from your busy schedule and answer the enclosed opinioinaire, I will be very grateful. Total time involved in responding to the opinioinaire should be approximately ten minutes.

I assure you that all responses will be treated in a confidential and professional manner. No attempt will be made to identify individual respondents. Please answer the opinioinaire completely. A self-addressed stamped envelope is enclosed for returning your completed opinioinaire. Your assistance will be appreciated. Thank you for your consideration.

Sincerely,

Joyce E. Burgett
Joyce E. Burgett, R.N.

Joyce Burgett is currently registered as a full time student in the Master of Nursing Program. Any assistance and cooperation you can give her will be appreciated.

Anna M. Shannon
Dr. Anna Shannon
Dean of the School of Nursing

108 A Julia Martin Drive
Bozeman, Montana 59715
April 14, 1977

Dear M.S.U. student:

Today the people of the United States are increasingly interested in good health. Inadequate or excessive food consumption appear to be significant factors in contributing to chronic illness in America. A study sponsored by the School of Nursing at Montana State University is being conducted to determine student perceptions of certain factors related to the prevention of inadequate or excessive food consumption, and how they may be related to a primary prevention program. This study will be included in a thesis under the direction of Dr. Laura Walker, Professor of Nursing of Montana State University School of Nursing.

To enable the researcher to obtain an accurate picture, it is important that a high percentage of responses from students be obtained. Your support and cooperation are asked in making this study a success. Being a fellow student, I realize the demands being made on your time. However, if you would take time from your busy schedule and answer the enclosed opinioaire, I will be very grateful. Total time involved in responding to the opinioaire should be approximately ten minutes.

I assure you that all responses will be treated in a confidential and professional manner. No attempt will be made to identify individual respondents. Please answer the opinioaire completely. A self-addressed stamped envelope is enclosed for returning your completed opinioaire. Your assistance will be appreciated. Thank you for your consideration.

Sincerely,

Joyce E. Burgett
Joyce E. Burgett, R.N.

Joyce Burgett is currently registered as a full time student in the Master of Nursing Program. Any assistance and cooperation you can give her will be appreciated.

Anna M. Shannon
Dr. Anna Shannon
Dean of the School of Nursing

108 A Julia Martin Drive
Bozeman, Montana 59715
April 14, 1977

Dear M.S.U. student:

Today the people of the United States are increasingly interested in good health. Smoking appears to be a significant factor in contributing to chronic illness in America. A study sponsored by the School of Nursing at Montana State University is being conducted to determine student perceptions of certain factors related to the prevention of smoking and how they may be related to a primary prevention program. This study will be included in a thesis under the direction of Dr. Laura Walker, Professor of Nursing of Montana State University School of Nursing.

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108 A Julia Martin Drive
Bozeman, Montana 59715
April 14, 1977

Dear M.S.U. faculty member:

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Dr. Anna Shannon
Dean of the School of Nursing

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Bozeman, Montana 59715
April 14, 1977

Dear M.S.U. faculty member:

Today the people of the United States are increasingly interested in good health. Alcohol abuse appears to be a significant factor in contributing to chronic illness in America. A study sponsored by the School of Nursing at Montana State University is being conducted to determine faculty perceptions of certain factors related to the prevention of alcohol abuse and how they may be related to a primary prevention program. This study will be included in a thesis under the direction of Dr. Laura Walker, Professor of Nursing of Montana State University School of Nursing.

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N378 [REDACTED] Burgett, Joyce F
B912 Perceptions of students
cop.2 and faculty regarding
selected health care
practices at Montana
State University

DATE	ISSUED TO
JAN 24 1974	PINKRUB 522 W HAYES
12	TAN 30 1974
FEB 07 1974	[REDACTED]
MAR 10 1976	[REDACTED]
MAY 15 1976	31
AUG 20	

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