



Health-Promoting Behaviours among Nursing Students in Saudi Arabia: A Systematic Review

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ABSTRACT

Background: Health promoting behaviors are concerned with the balance diet, proper sleep, stress management, healthy coping strategies, spiritual growth, cancer & other physical diseases 'prevention and promoting the healthy physical exercises for living healthy. The nursing students' health promoting behavior is direct link with their services given to the patients the more the health promoting behaviors the more effectively provide the services.

Aim: The aim of the current study is to evaluate and examine the health promoting behaviors among the nursing students in Saudi Arabia.

Method: An analysis of the grounds for the fundamental Kitchenham systematic review technique. Statistics acquired from the Arab region indicate that articles written between 2003 and 2021. Finding, screening, evaluating eligibility for, and included the studies in the method with relation to the targeted concern.

Results: 23 articles were reviewed in this systematic review out of 48, 469. The studies were selected based on research questions, which further divided into 4 syntax. After screening, selection, identification and including step, the researches were used in this systematic review.

Conclusion: The nursing students' health-promoting activities are related to their personal, religious, and spiritual elements. It also relies on how physically active nursing students are because the more they do that, the more they will display behaviors that are good for their health and that are also good ways to deal with stress. As a result, training programs for physical fitness, spiritual development, and personal development

Keywords: *Health, Health Promoting Behavior, nursing students, Arab Region*

INTRODUCTION

Organizing one's daily life, schoolwork, and social life throughout the university years brings many new issues for younger people, including taking control of one's health during a time when one is typically believed to be on the path to very good health.

These situations are especially difficult for students in their first year who are younger and less familiar with the system of healthcare and the services available to promote health in their environment (Haas et al., 2018).

Within six years after his graduation, the majority of students with sufficient levels of physical activity had continued to be energetic, compared to the majority of students with inadequate levels. Adequate physical activity, good nutrition, rest, and abstinence from drug use are characteristics of lifestyles that support mental and physical wellness maintenance and lower the risk of diseases that are not transmissible (Almutairi et al., 2018; Yakout & Jahlan, 2023).

Universities are places where students spend a lot of time sitting down since smoking, drinking, and using other drugs are so common among college students. It is necessary for them to deal with "moving away from home, growing autonomy, changes in peer groups, new social situations, repair of academic responsibilities, and exposure to smoking as the environment has an adverse influence on their physical and mental health (Armoon et al., 2019).

The health prompting behaviors are considered as the behavior, which has significant positive impact over the mental and physical health among the nursing students. The most effective strategy for encouraging people, and especially students, to adopt healthy lifestyles and behaviors that contribute to the prevention of non-communicable illnesses is health promotion. When they become doctors, medical students are expected to play a significant part in the promotion of health, taking into account the link between the personal health of healthcare workers and patient adoption of good habits. In order to set an example for others and have influence over their patients and society at large, medical students must adopt and uphold a healthy lifestyle (Shahbal et al., 2022; Olsen & Nesbitt, 2010; Yakout, Alanazi, Jahlan & Shahbal, 2023).

METHOD

The method is based on the Preferred Reporting Items for Systematic Reviews and Meta-Analysis (PRISMA) guideline, which focuses on the evaluation of the intervention, or strategies with the help of define objective, which are considered to be effective and help in diagnosing, preventing and pronging.

Search strategy and selection criteria

Systematic search was done by following research engine "Google Chrome" "Microsoft" and "Maxton" CINAHL, and ProQuest, a dissertation database, by using the EBSCO host search engine of Kent State University. Health Source: Nursing/Academic Edition, Library Literature & Information Science Full Text (H.W. Wilson), MEDLINE, SocINDEX with Full Text, PubMed, and Google Scholar. Even more than this, Saudi Medical Journal (SMJ) and Saudi Digital Library (SDL) database were utilized in trying to spot more studies conducted in the Kingdom of Saudi Arabia.

Phase I-Plane Review

Planning Review is one the phase of the systematic review in which the identification of appropriate strategies reviewed according to the all protocols of it by relevant database and research engines.

Step 1: identification of Research Question

The identification of researches base on the research questions. The research questions have variables such as dependent and independent variables also including the confounding and extraneous variable. According to these research variable researches are identified.

P= Population: Nursing Students

I =Intervention: Health-Promoting Behaviours

C=Comparison: A Systematic Review

Research question: What are the promoting behaviours among the nursing students in Saudi Arabia?

Step 2: Inclusion and Exclusion Criteria

Based on the discovery and establishment of precise evaluation criteria, the studies for this specific systematic review were chosen. Highly accurate selection criteria that show what is included and what is excluded

The following are among the criteria for including and excluding research:

No	Criteria	Inclusion	Exclusion
1	Research that ranges from 2003 to 2020	✓	
2	Research that is below 2003		✓
3	Saudi nursing students	✓	
4	Health promoting behaviors among the nursing students	✓	
5	Other than English language		✓
6	Quantitative /Qualitative	✓	
7	Data collected from academic article published in a peer-reviewed scholarly journal	✓	
8	Research that focused on evaluating and practicing of health promoting behaviors	✓	

Step 3: Literature Search

In this step, the literature was searched from the search engines were defined above. Research articles extracted and screened out as per the different syntax.

Search syntax

Implementation of both inclusion and exclusion standards according to syntax recognition. The current study concentrated on a specific syntax for data extraction from pre-defined sources and

search engines. In accordance with this particular study's keywords, syntax is created as Pender's and Health Promotion Model, Health-Promoting Behaviours, healthy behaviours among nursing, nursing students' health promoting behaviours in Saudi Arabia.

- Syntax 1: Pender's and Health Promotion Model
- Syntax 2: Health-Promoting Behaviours
- Syntax 3: Healthy behaviours among nursing
- Syntax 4: Nursing students' health promoting behaviours in Saudi Arabia

Database Statistics

No	Database	Syntax	year	No of researches
1	Google scholar	Syntax 1	2003 -2021	27,600
		Syntax 2	2003 -2021	
		Syntax 3	2003 -2021	
		Syntax 4	2003 -2021	
2	Research Gate	Syntax 1	2003 -2021	1000
		Syntax 2	2003 -2021	
		Syntax 3	2003 -2021	
		Syntax 4	2003 -2021	
3	PubMed	Syntax 1	2003 -2021	869
		Syntax 2	2003 -2021	
		Syntax 3	2003 -2021	
		Syntax 4	2003 -2021	
4	MEDLINE	Syntax 1	2003 -2021	10,000
		Syntax 2	2003 -2021	
		Syntax 3	2003 -2021	
		Syntax 4	2003 -2021	
5	Science Direct	Syntax 1	2003 -2021	9,000
		Syntax 2	2003 -2021	
		Syntax 3	2003 -2021	
		Syntax 4	2003 -2021	

After scrutinizing data tally marking was necessary for every search from the database and

search engine. Data gathered based on Google scholar 27,600, Research Gate 1000, PubMed

869, MEDLINE 10,000 and Science Direct 9,000.

Phase 2: Conducting the review

This phase conducting the review based on data collection and gathering of all data through the mapping and rehearsal, which is linked to research questions.

Step 4: Selection of Studies Based Upon the Previously Defined Criteria

23 studies were found to be eligible after the data were examined using the previously defined criteria, demonstrating that these were the most effective, highly relevant, and suitable research. The databases and peer-reviewed sources yielded 48,469 articles. Only 23 papers remain that are valid, reliable, and generalizable for the appropriate data similarity after applying the selection criteria.

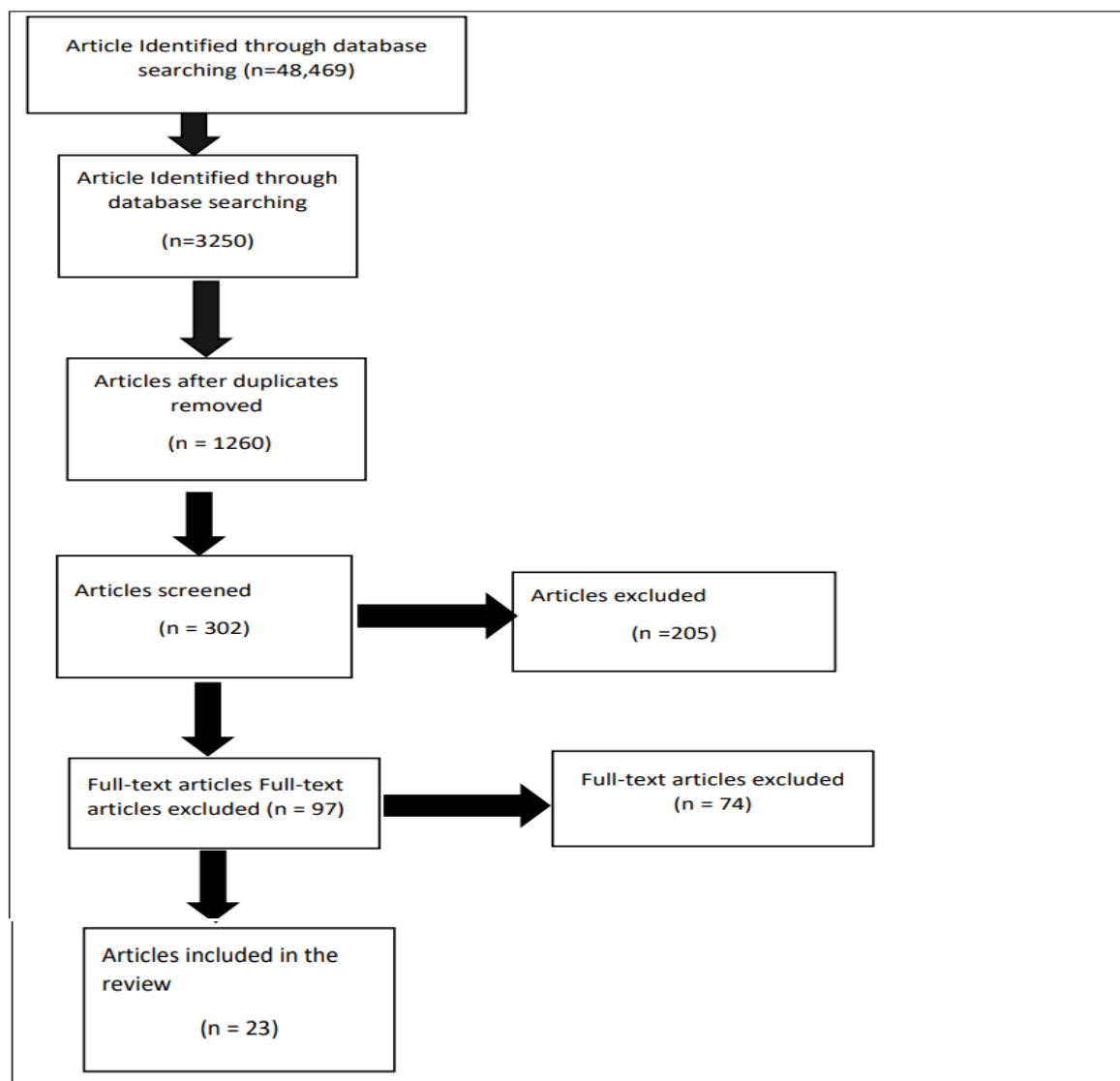


FIGURE 1: PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-analyses) flowchart showing article selection process

Step 5: Data Extracted from Selected Studies

From the 48,469 studies in the extracted study, 23 publications were selected. After extracting the numerous records from the various resources.

Records after replication elimination showed that 1990 publications were eliminated, leaving 1260 research for further reviewed. There were still 23 articles left after identifying the full-text articles

and assessing the 97 articles' eligibility. The article was eliminated when it was found to contain seven duplicates, erroneous complications relating to the study's complaint, two publications with results that did not match this particular study, and one article unrelated to the study's conclusion.

Step 6: Evaluation of Risk of Biasness in the Studies

This step is involved the evaluating the biasness in the studies such as cultural, social, religious, ethical biasness but in this systematic review study of Health-Promoting Behaviours among Nursing Students in Saudi Arabia, within the healthcare institution, do not promote this practice so no such biasness variable found here.

Step 7: Study Presentation and Basement of the Quality of Evidence

This step is concerned with the understanding of the validity, reliability, measurability and practice of healthcare behaviors within the Saudi region among the nursing students.

Stage 8: Synthesize Data

Data synthesis includes details regarding the tools, designs, and outcome formulations used to

conduct the systematic review. The development of formats based on reference identification through meta-analysis is a common topic of data synthesis.

Phase 3 – Document Review

The criteria for the current empirical and systematic review of the manuscript have already been operationalized and specified for its quality, complexity, and productivity. Research in the Saudi Arabian region and nursing students' basic comprehension of behaviours that promote health are closely related.

Stage 9: Write Review Report

Making a review report based on the documentation of all the data on the subject of "Health-Promoting Behaviours among Nursing Students in Saudi Arabia"

Stage 10: Validate Report

The current systematic review, which was prepared based on the 23 papers that were discovered and demonstrate proportionality in the content, was validated based on questions that demonstrate the validity, generalizability, and reliability of the recognised literature.

TABLE 2: Research Matrix

	Source	Study Design	Purpose	Participants	Instrument used	Result
1	Al-Qahtani, M. F. (2019).	Cross-sectional	To identify variations and associations between healthy lifestyle habits and demographic characteristics among female university students.	female university students enrolled in health-related (previously published) and non-health-related	Health Promoting Lifestyle Profile II (HPLP II)	Significant variation between healthy lifestyle habits and non-health-related
2	Al-Qahtani, M. F. (2017).	cross-sectional	to explore female undergraduates' healthy behaviours, to explore significant differences in their healthy behaviours, and to discover potential	324 medical students at Imam Abdulrahman Bin Faisal University	Health Promoting Lifestyle Profile II (HPLP II)	There were significant differences in students' healthy behaviours and associations between HPLP-II scores and demographic characteristics. The spiritual growth subscale had the highest

			correlations between students' healthy behaviours and their demographic variables			mean, and physical activity had the lowest mean.
3	Bozlar, V., & Arslanoglu, C. (2016).	descriptive study	s to examine healthy life style behaviours of SPES students in terms of Body-Mass Index (BMI) and other health variables	students in the Schools of Physical Education and Sport (SPES), Turkey	Health Promoting Lifestyle Profile II (HPLP II)	It has been observed that as the family income and education level increases, there is an increase in the awareness of the Healthy Lifestyle Behaviours applied. The findings of the literature have revealed that there is a serious lack of exercise and proper nutrition
4	Almomani, M. H., Rababa, M., Alzoubi, F., Alnuaimi, K., Alnatour, A., & Ali, R. A. (2021).	one-group pre-test–post-test study design	To assess the effect of a health promotion course on knowledge and attitudes towards chronic non-communicable diseases (CNCDS) among undergraduate students in a Jordanian university.	undergraduate students registered in a 3-credit health promotion course was enrolled in the study	Intervention: the HPC The HPC is a three-credit hour elective course offered by the	The overall knowledge and attitudes scores were significantly higher among females in the pre-test, but the differences in their overall scores became insignificant in the post-test. Education on specific topics was effective in improving university students' knowledge and attitudes about health-promoting behaviours, thereby preventing CNCDS.
5	(Al-Momani, 2021)	cross-sectional descriptive	Investigate Health-promoting lifestyle and its association with the academic achievements of medical students in Saudi Arabia	312 medical college students of King Saud University (KSU)	Health Promoting Lifestyle Profile II (HPLP II)	A mean score of 3.39 for total health-promoting behaviours was reported. The highest mean score was reported for spiritual growth (3.75) and the lowest was reported for health responsibility (3.23). The mean body mass index (BMI) of the students was 24.9 ± 6.4 kg/m ² . An analysis of variance identified an association between a student's GPA and the spiritual growth dimension ($P = 0.014$). Based on the Pearson matrix correlation coefficient, there was a statistically significant and positive relationship between the HPLP II dimensions ($P < 0.05$).

6	Shaheen, A. M., Nassar, O. S., Amre, H. M., & Hamdan-Mansour, A. M. (2015).	cross-sectional descriptive	To determine Factors Affecting Health-Promoting Behaviours of University Students in Jordan	525 of university students receiving education	Health Promoting Lifestyle Profile II (HPLP II)	Significant differences were found between Health Promoting Lifestyle Profile mean score and the mean score of its subscales and student's age, gender, employment status, family income, university type, and faculty type. Conclusions: These findings suggest that Interventions are needed to enhance the practice of health promoting behaviours. These interventions should focus on demographic variations among university students
7	Nassar, O. S., & Shaheen, A. M. (2014)	descriptive cross-sectional	To determine health-promoting behaviours of university nursing students in Jordan.	167 undergraduate nursing students in Jordan	Health Promoting Lifestyle Profile II (HPLP II)	Study results revealed that the mean item score for total Health-Promoting Lifestyle Profile II was (127.24 ± 21.03). The students obtained highest scores in spiritual growth (25.04 ± 4.70) and lowest in physical activity subscales (16.27 ± 5.21). Significant difference was found between Health-Promoting Lifestyle Profile II subscales (stress management, health responsibility, and interpersonal relations) and students' age and gender
8	Mooney, B., Timmins, F., Byrne, G., & Corroon, A. M. (2011)	mixed method design	To identify current health promotion curricular content within the Irish undergraduate nursing programme context <ul style="list-style-type: none"> • To measure nursing students' attitudes towards health promotion • To examine nursing students lifestyle 	study population comprised all students (n=348) at two university sites in Dublin, Ireland	College Lifestyle and Attitudinal National survey (CLAN) (Department of Health and Children, 2005),	The role of the nurse as health promoters is well recognized. However despite acknowledgement by professional nursing bodies and nurse educators that health promotion forms a central tenet of undergraduate nurse education curricula, there are varied approaches to teaching and learning and little formal evaluation of the consequences of approaches taken.

9	Polat, Ü, Özen, Ş, Kahraman, B. B., & Bostanoğlu, H. (2016).	descriptive study	To determine health promotion behaviours in nursing students.	245 nursing students during the spring semester of the 2012-2013 academic year, Turkey	Health Promoting Lifestyle Profile II (HPLP II)	A significant difference was found between students with and without diagnosed health problems in terms of their mean scores on the Health Promotion Lifestyle Profile Scale-II subscales of health responsibility, spiritual growth, and interpersonal relations, as well as their total mean scores ($p < .05$). The exercise, nutrition, spiritual growth, and stress management subscale scores of those students regularly going for health checks were determined to be significantly higher than those of the students who did not obtain regular health checks. Students' healthy lifestyle behaviours were generally found to be at the medium level.
10	Hwang, Y., & Oh, J. (2020)	cross-sectional, self-report survey	to investigate the relationships among health perceptions, health concern, and health-promoting behaviours in nursing students, and assessing the effects of different variables on health-promoting behaviours	320 nursing students recruited from three universities in South Korea a	Health Promoting Lifestyle Profile II (HPLP II)	The mean for the subscale of physical activity among health-promoting behaviours was the lowest. The main factors affecting health-promoting behaviours were gender, health perceptions, health concern, and time per week spent searching online for health-related information. The main factors affecting physical activity were gender, health concern, and time per week spent searching online for health-related information.
11	Kim, M. Y., & Kim, Y. J. (2018).	cross-sectional descriptive survey	To identify the level of health promotion behaviours among college students and the related variables.	277 students from two universities in Korea	Health Promoting Lifestyle Profile II (HPLP II)	Health promotion behaviours were higher when health cognition was higher ($r=.421$, $p<.001$), health perception was higher ($r=.326$, $p<.001$), and self-esteem was higher ($r=.526$, $p<.001$). The constructed model for health promotion

						behaviours showed that the statistically significant explanatory variables were health cognition, health perception, and self-esteem. The model explained 34.9% of the variance in health promotion behaviours
12	Cao, W., Chen, C., Hua, Y., Li, Y., Xu, Y., & Hua, Q. (2012).	Quantitative study	examines the distribution of the health-promoting behavioural patterns – both for the purpose of developing culturally sensitive health advancement strategies for Chinese seniors	1012	Health Promoting Lifestyle Profile II (HPLP II)	This factor analysis supported a six-factor model of the original HPLP-C scale. Confirmatory factor analysis indicated a good fit, with factors explaining 88.1% of the common variance of the HPLP-CE scores. Cronbach's α coefficients were 0.91 for the revised instrument, and ranged from 0.67 to 0.88 for six dimensions. The split-half reliability was 0.92, while the test-retest reliability was 0.68. Relationships between HPLP-CE, perceived health status, SF-36 scale scores, and associations with selected demographic variables were significantly positive.
13	Fashafsheh, I., Al-Ghabeesh, S. H., Ayed, A., Salama, B., Batran, A., & Bawadi, H. (2021).	A cross sectional, correlational design w	to assess the health-promoting lifestyle behaviours of nursing students at Arab American University Palestine, Palestine	350 nursing students at Arab American University	Health Promoting Lifestyle Profile II (HPLP II)	The total HPLP score was 138.57 ± 22 . Spiritual growth had the highest mean and physical activity had the lowest subscale. A significant relationship between the age of students and the sub-scales of stress management as well as physical activity. However, gender and spiritual growth subscale differed significantly. Also, there was a significant difference between students' year level and physical activity. University administrators and staff should provide guidance to progress with more actual strategies to improve nursing students'

						health-promoting behaviours.
14	Azami Gilan, B., Janatolmakan, M., Ashtarian, H., Rezaei, M., & Khatony, A. (2021)	cross-sectional study	evaluating the health-promoting lifestyle profile (HPLP) of medical sciences students of Kermanshah, Iran	343 medical sciences students	Health Promoting Lifestyle Profile II (HPLP II)	Data were analysed using descriptive and analytical statistics. The mean overall HPLP-II score of the subjects was 2.25 ± 0.44 out of 4. Of the six HPLP-II dimensions, the highest and lowest scores belonged to interpersonal relations and physical activity, respectively. The mean overall HPLP-II score was statistically different in terms of gender, marital status, smoking habits, and economic status ($P \leq 0.05$).
15	Hacıhasanoğlu, R., Yıldırım, A., Karakurt, P., & Sağlam, R. (2011).	descriptive and cross-sectional study	to determine the level of university students' application of healthy lifestyle behaviours and affecting factors.	981 students selected by a simple random sampling method from these schools	Health Promotion Life-Style Profile (HPLP)	It was established that student's grade, educational level of parents, economic status of the family and the student, the place where the student stays and smoking status of the student resulted in a significant difference in HPLP Scale total score average and the mean score of the majority of subscales
16	Kritsotakis, G., Georgiou, E. D., Karakonstandakis, G., Kaparounakis, N., Pitsouni, V., & Sarafis, P. (2020).	descriptive and longitudinal study	To examine healthy lifestyle behaviours of nursing students as they entered and at the end of the education process to see what changes occurred as students were exposed to the nursing curriculum	70 students enrolled in the first year of their nursing program, Marmara University, School of Nursing.	Health Promotion Life-Style Profile (HPLP)	The findings indicated that healthy lifestyle behaviours of nursing students changed over time, from when they began and at the end of every year during their nurse training

17	Al-Kandari, F., Vidal, V. L., & Thomas, D. (2008).	cross-sectional, descriptive survey	To determine health promoting behaviours of university students in Jordan and factors influencing them.	202 nursing students of College of Nursing in Kuwait	Health Promotion Life-Style Profile (HPLP)	<p>The students also had a low positive Health-promoting lifestyle. A significant association was noted between the sociodemographic variables,</p> <p>particularly age, marital status, and nationality, with the body mass index and Walker's Health Promoting Lifestyle Profile. A significant relationship was established between the body mass index and the overall Walker's Health Promoting Lifestyle Profile and the nutrition subcategory. The findings warranted interventions for improved health behaviours and implied the need for the integration of healthy lifestyle programs into the nursing curricula to meet the escalating demands of the students' role in health promotion and disease prevention</p>
18	Wei, C., Harada, K., Ueda, K., Fukumoto, K., Minamoto, K., & Ueda, A. (2012)	cross-sectional, descriptive survey	to determine whether there were any relationships of their demographic variables with a health-promoting lifestyle profile	The survey participants consisted of 336 students (161 males, 175 females) with the gender ratio reflecting that of the total university population	Health Promotion Life-Style Profile (HPLP)	<p>The whole cohort of participants had an overall HPLP-II mean score of 2.50 (SD = 0.29), with the highest mean score being for interpersonal relations (3.05 ± 0.44), and the lowest mean score being for health responsibility (2.01 ± 0.53). The overall HPLP-II score of the students during the first university year was 2.59 (SD = 0.29), and this score progressively declined in their second year (2.49 ± 0.29), third year (2.47 ± 0.28), and fourth year (2.45 ± 0.30). Female students practiced significantly better health responsibility, interpersonal relations, and</p>

						nutrition than males, and male students practiced significantly better physical activity than females. The students who were living with family had significantly higher nutrition scores than those not living with family.
19	Stark, M. A., Hoekstra, T., Hazel, D. L., & Barton, B. (2012).	A pre-test post-test design with a comparison group	To examine whether health profession students increased healthy behaviours after taking courses that emphasized the health of the professional, not only of the client	The sample for this study consisted of 201 undergraduate health professional students	Health Promoting Lifestyle Profile II (HPLPII),	The comparison group (SLP) had significantly lower scores on the overall Health Promoting Lifestyle Profile II (HPLPII), physical activity and nutrition scales at post-test when compared to pre-test. In contrast, students in the intervention group (NUR & OT) significantly increased in their health responsibility as measured on the HPLPII survey at the end of the semester.
20	Wittayapun, Y., Tanasirirug, V., Butsrirupoom, B., & Ekpanyaskul, C. (2010)	a cross-sectional study	to a) examine the relationships between level, monthly income, perceived benefits of action, perceived barriers to action, perceived self-efficacy, and health-promoting behaviours, and b) explore factors affecting health-promoting behaviours of nursing students	323 nursing students in the second semester of the Academic Year 2009 of the Faculty of Nursing, Srinakharinwirot University, Thailand.	Health Promoting Lifestyle Profile II (HPLPII),	The findings suggest that interventions are needed to enhance practicing health promoting behaviours. Tailored interventions should emphasize increasing perceived self-efficacy and perceived benefits as well as decreasing perceived barriers particularly in the first and third year nursing students.
21	Hosseini, M., Ashktorab, T., HosseinTaghdisi, M., Vardanjani, A. E., & Rafiei, H. (2015)	cross-sectional	to determine the relationship between health-promoting behaviours and certain demographic characteristics of nursing students in Tehran	404 students (107 males and 297 females) of universities of Tehran	Health Promoting Lifestyle Profile II (HPLPII),	According to the results, health-promoting behaviours among the students scored highly. The analysis of subscales of health-promoting lifestyle profile 2 showed that the highest mean belongs to the subscale of spiritual growth and the lowest mean belongs to the subscale of physical activity. The mean of health-promoting behaviours among married students was higher than

						among single students. Moreover, as students advanced through academic years, health responsibility increased and stress management reduced.
22	Borle, P. S., Parande, M. A., Tapare, V. S., Kamble, V. S., & Bulakh, P. C. (2017)	cross-sectional	To determine the health-promoting lifestyle behaviours of nursing students in a tertiary care institute, Maharashtra, India	The survey participants consisted of 124 students	Health Promoting Lifestyle Profile II (HPLPII),	Majority 89(71.77%) were have good HPLP score and 29(23.39%) were excellent category. The mean overall (Total) HPLP score was 62.27±9.66 (range 33-87). The highest mean score in the subscale were for self-concept and spiritual growth. The lowest scores were for food practices and physical activity. Highly significant difference (p<0.0001) was found between overall mean HPLP scores among the different age groups
23	Kim, H. J., Choi-Kwon, S., Kim, H., Park, Y. H., & Koh, C. K. (2015)	cross-sectional design	s to describe and compare HPLB and psychological status of Koreans and Arabs in the UAE and their associations in both groups	Surveys were conducted with 107 Arab and 117 Korean participants	Health Promoting Lifestyle Profile II (HPLPII),	Findings suggest considering cultural aspects, such as different values placed on physical fitness and social/interpersonal relationships, in developing and implementing health education and/or promotion programs. Assessment of psychological status (i.e., depression, anxiety, and stress) should also be included in health promotion programs and related health policies for Korean migrants and Arab nationals in the UAE

Literature Review Finding

The present’s literature review finding suggest the themes which shows the health prompting behaviours among the nursing students. The following themes are discussed below which are extracted from the 23 articles.

Theme 1: Education

This theme defined that educational background and current level of education also associated promoting behaviour among the nursing students. Literature review suggested that nursing with the good knowledge and information about the health promoting behaviour were able to execute the healthy behaviours. It is also observed that nursing who had taken the health promoting behaviour

courses has more positive behaviour than the nursing students who didn't have (Bozlar & Arslanoglu, 2016; Hwang & Oh 2020; Hacıhasan et al., 2011; Kritsotakis et al., 2020; Borle et al., 2017 Stark et al., 2012 & Borle et al., 2017).

Theme 2: Awareness

The literature review also found that awareness about the health promoting behaviour lead to exhibit the healthcare behaviour by the nursing students. Research concluded that those nursing who has good awareness about the health promoting behaviour are engage in the healthy behaviours as compare to the nursing students who do not have any awareness about it (; Hwang & Oh 2020; Kim & Kim, 2018 & Borle et al., 2017).

Theme 3: Personal Factor

The literature found the theme of personal factors as attitude, habits and personal choices lead toward the health promoting behaviours among the nursing students. The literature suggested that people have understanding about the risk of smoking but they are kept smoking by their personal choice. Also positive attitude also matter in engaging in the HPB as those nursing who had positive attitude toward the HPB were more frequently exhibiting the physical activities and healthy eating as compare to those who had negative attitude. Interpersonal relationship also has linked with the health prompting behaviour as most of our learning is based on modelling and observing (Almomani et al., 2021; Shaheen et al., 2015; Mooney et al., 2011; Polat et al., 2016; Kim & Kim, 2018; Cao et al., 2021; Azami et al., 2021; Al-Kandari, Vidal & Thomas, 2008; Wei et al 2012; Borle et al., 2017; Wittayapun et al., 2010).

Theme 4: Spiritual & Religious

In this theme of behaviours that promote health, spiritual growth, which is the second-worst performer, was most significantly impacted by health attitudes. It may be predicted that a high degree of health perceptions will improve nursing students' propensity to engage in health-promoting behaviours because health perceptions can serve as the driving force behind such

behaviours (Almutairi et al., 2022; Al-Qahtani, 2017; Al-Momani, 2021; Nassar & Shaheen, 2014; Borle et al., 2017; Fashafsheh et al., 2021& Borle et al., 2017)

Theme 5: Physical Activities

Physical activities are important for the health. Nursing students who are engaging in the psychical activities such as indoor or outdoor games which release the stressors which prevent the nursing students from any maladaptive coping strategies and promote the healthy behaviours (Fashafsheh et al., 2021; Azami et al., 2021; Hosseini et al., 2015; Borle et al., 2017 & Borle et al., 2017).

DISCUSSION

A framework for explaining and forecasting particular health behaviours is provided by the Health Promotion Model (HPM). The HPM demonstrates how each individual is a biopsychosocial being that is partially formed by their environment but also works to foster environments that allow both innate and acquired human potential to be fully developed. The HPM was created with the intention of focusing on individuals, but the framework can also be utilised to focus on families, groups, or communities (McEwen, 2014).

The HPM consists of three main areas that nurses can utilise to evaluate behaviours that promote health, including personal traits and experiences; cognition and affect unique to activities; and behavioural outcome. Additionally, the HPM integrates aspects of the change procedure, such as a dedication to an action plan and recognition of conflicting needs. Involvement in encouraging healthy behaviours is the result. Through interpersonal interactions and biophysical mechanisms that encourage people to engage in health-promoting practises that contribute to overall wellbeing, Pender works to establish a model that will influence nursing society as a whole (Parsons et al., 2011; Alfayez, Al Mutairi, & Shahbal, 2023).

Physical activities and spiritual growth has linked with the health promoting behaviour .A cross-sectional study was conducted to assess the nursing students' pro-health behaviour. The

findings revealed that health-promoting behaviours like taking care of one's health, physical exercise, spiritual development, and stress management were statistically significant components of quality of life and should be taught to nurses (Shahbal et al., 2022; Mak et al., 2018). The study demonstrated that gender differences existed in health-promoting profiles, notably with regard to physical activity and interpersonal ties among the nursing students. The wage scale and knowledge of the health-promoting behaviours were revealed to be factors which enhance these positive behaviours (Alzahrani et al., 2019).

Moreover, health responsibility, exercise, good diet, social interaction, spiritual development, and stress management are the six elements of behaviours that promote health. The research suggests that those who make an attempt to live a healthy lifestyle do so because they want to be healthier (Cockerham, 2005). The evidence that is now available indicates that a health professional's own health practises can influence their performance and mould the interventions they offer to their clients about health-related issues (Refai et al., 2022; Alpar et al., 2008).

Also administrative actions to provide sufficient staffing and resources, stimulate the development of individual strengths among nurses, and promote nurses' dedication to their personal wellness could all be effective ways to improve nursing quality of performance and patient outcomes which increases the health prompting behaviours (Cho & Han, 2018).

Likewise education and training also increase the awareness about the health promoting behaviour among the nursing students. As the institutes which include the health promoting behaviour as course work it increases the nursing students understanding regarding it and inclined them toward practicing more health promoting behaviours (Sharma, 2021).

CONCLUSION

The health promoting behaviours among the nursing students are linked with their religious, spiritual and personal factors. It also depends on the how much physically nursing students are

active as more engage in the physical active the more exhibiting of the health promoting behaviour which is also used as healthy coping strategies for releasing the stressors (Hosseini et al., 2015). Therefore the training programs regarding the physical activities, spiritual growth and improving the personal factor.

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CONFLICT OF INTEREST

The author declares no conflict of interest

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