

Physical Activity, Sickness Absence, Self-rated Health and Quality of Life among Norwegian Doctors. A Comparative Study of National Samples

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Background

Physical activity is associated with health benefit. Healthy doctors have a positive value for the stability of health care system. More knowledge is needed on the relationship between physical activity and health of Norwegian doctors.

The aims of this study are to (a) examine the trend in physical activity among Norwegian doctors, (b) the reasons for physical activity and (c) the associations between physical activity and self-rated health, sickness absence, work stress and quality of life.

Methods

Data were collected in nation-wide postal surveys among Norwegian doctors in 1993 (n=1,023) and 2010 (n=959). The questionnaires contained items on self-rated health (4 response alternatives from very good to bad), number of days of sickness absence in a 12 month period, quality of life (7-point scale from very dissatisfied to very satisfied), work stress (Effort-Reward questionnaire) and the frequency of and reasons (5 response alternatives from no to great) for physical activity.

Results

The frequency of physical activity increased significantly. There were higher proportion of physical activity 5-7 times a week (6% vs. 12%), lower proportion of activity 1-4 times a week (72% vs. 61%) and stable proportion of activity <1 time a week (22% vs. 28%) from 1993 to 2010.

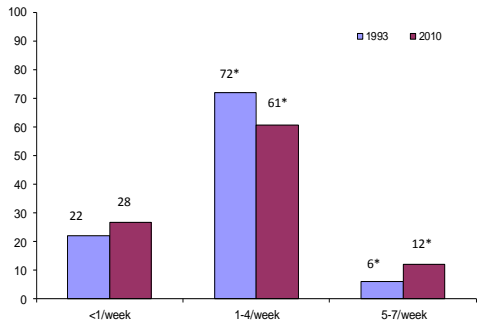
Doctors who were physically active at least ones a week gave quality of life, health, enjoyment and job capacity as reasons for engaging in physical activity higher than the less frequent physically active.

Doctors participating in physical activity ≥ 1 a week compared with <1 a week significantly more often reported their health as very good (47% vs. 25%), a low work stress (83% vs. 77%), a low sickness absence in the past year (84% vs. 77%), and a high quality of life score (55% vs. 41%). There were no gender or age differences in level of physical activity.

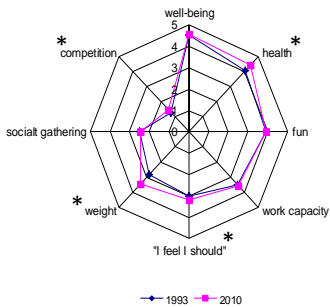
Conclusions

Norwegian doctors increased their physical activity from 1993 to 2010. Weekly physical activity was associated with better quality of life, lower sickness absence, lower work stress and higher self-rated health.

Changes in frequency of physical activity among doctors from 1993 to 2010 (%)



Changes in motivations for physical activity among doctors from 1993 to 2010 (mean, GLM, controlled for sex and age)



Physical activity and health in 2010

	≥ 1 / week % (n=685)	<1 / week % (n=253)
Self-rated health very good or good	89.6*	79.8*
Quality of life high (score 6-7)	54.8*	40.8*
Work stress (ERI) low risk group	83.3*	77.4*
Sickness absence 0-3/year	84.4*	76.1*

* p<0.05