A COMPARISON BETWEEN ADMINISSION RECRUITERS' HEALTH-RELATED BEHAVIORS ON AND OFF THE ROAD

A THESIS

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I am submitting herewith a thesis written by Georgia Kousoulis entitle Between Admissions Recruiters' Health-Related Behaviors On and O have examined this thesis for form and content and recommend that it partial fulfillment of the requirements for the degree of Master of Scientific Health Studies.	ff the Road." I be accepted in
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Accepted:

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ABSTRACT

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A COMPARISON BETWEEN ADMISSIONS RECRUITERS'HEALTH-RELATED BEHAVIORS ON AND OFF THE ROAD

MAY 2005

The purpose of this study was to examine the difference in health- related behaviors while university recruiters are traveling and while they are at home. Analysis of a survey completed by 202 recruiters revealed that there is a significant difference for recruiters in health related behaviors when traveling as compared to when at home. These behaviors include driving behaviors, nutrition, safety, exercise, quality and hours of sleep hours, stress, and days the participants felt ill enough to miss work but did not take time off. Time on the road was not a significant factor because admissions recruiters change several behaviors when traveling regardless of time on the road, it is important for them to be educated about the potential consequences of their behaviors.

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CHAPTER I

INTRODUCTION

The state of Texas is home to 70 four-year universities or colleges and 55 two-year junior or community colleges which are continually growing in their population of students (Team Web at UT Austin, 2003). Every fall semester, as college freshman students are settling in to the University of their choice, admissions recruiters in Texas start looking for their next class of students. The recruiters travel to college fairs at high schools and colleges all throughout the country. The college fair programs are set up by the Texas Association of Collegiate Registrars and Admissions Officers (TACRAO).

Because of the large geographic areas that must be covered by recruiters, many of them are away from home for a week or more at a time. The on-the-road lifestyle of these frequently traveling admissions recruiters may be detrimental to their health, safety, and performance.

Several studies with other business travelers have revealed risks associated with on the road lifestyle (Stutts, 2003; Bigert, 2003; Mason, 2000). First, there is a higher risk for motor vehicle accidents, particularly accidents related to sleep deprivation (Stutts, 2003). Studies of drivers have indicated that a sedentary lifestyle and poor nutrition may lead in the long term to heart disease and an increased risk for cardiovascular disease, diabetes, osteoporosis and other health problems (Bigert, 2003; Mason, 2000; Striker, 1999). Other negative health factors, related to long hours away from family and

friends, are isolation, psychological stress, depression, and domestic problems (Striker, 1999).

Since the health and safety of admissions recruiters is very important to the to the university, it would be valuable to examine the health-related behaviors of recruiters while they are traveling for business and compare that to their behaviors while they are working on-site at their universities.

Purpose of the Study

The purpose of this study was to identify what effect business travel has on the health-related behaviors of admissions recruiters traveling in the state of Texas and comparing them to their behaviors while not traveling for business.

Hypotheses

The hypotheses examined in this study were as follows:

- 1. There will be no statistically significant difference in the health-related behaviors of admissions recruiters while traveling in the state of Texas when compared to their behaviors while at home at their universities or colleges.
- 2. There will be no statistically significant correlation between the amount of time spent on the road in business travel and the health-related behaviors.

Delimitations

This study examined only University admissions recruiters who are traveling in the state of Texas, and who are over the age of the 18.

Limitations

The study used a convenience sample; therefore, results can not be generalized to the entire population of university admissions recruiters.

Assumptions

The researcher assumed that the subjects answered honestly.

Definition of Terms

The following terms are defined in order to provide an understanding of the occupation of this population:

University Admissions Recruiter (also known as Admissions Counselor or Admissions Road Runner) - Among other responsibilities which may vary person to person, a university admissions recruiter is responsible for presenting an institution's philosophy, programs, and services to prospective students and the general public in individual and group settings (Ikenberry, 2003).

College Fair Program - A student recruitment program, usually at a local high school or community college, that features representatives from a variety of colleges and universities, during which prospective students in high school will choose to speak to representatives of the educational institution of their choice to aid them in their college search (Texas Association of Collegiate Registrars and Admissions Officers, 2003).

Texas Association of Collegiate Registrars and Admissions Officers (TACRAO) - A professional, not-for-profit, educational association composed of registrars and admissions officers from collegiate level institutions. This organization contributes to the

advancement of higher education by organizing college fair programs and hosting conferences (Morris, 2003).

Importance of the Study

This study will provided baseline information on health behaviors for this population by comparing their behaviors during business travel to those practiced while at their home office. The findings of this study could be used to design effective health promotion and risk reduction programs for admissions counselors, in particular, as well as for business travelers in general.

CHAPTER II

LITERATURE REVIEW

A review of the literature on the health related behaviors of university admissions recruiters was conducted, but no published research studies specific to this population were found. Very little research has been done with short-term business travel in general (Ivencevich, 2000). Therefore, relevant studies of other groups of business travelers and other employees were reviewed and are presented in this chapter (Hanley, 1999; Stutts, 2003; Vasse, 1998; Bigert, 2003; Davis, 2003; Striker, 1999, Michailidis, 2002).

Business Travelers

Each year, 34 million adults take approximately four hundred and five million business trips that take them at least 50 miles away from home (Conlon, 2004; Travel Industry Association of America, 2002). Business travel composes about 18% percent of the total U.S. travel (Travel Industry Association of America, 2004). The majority of business travelers are between the ages of 25 and 49 (Fisher, 1998; Conlon, 2004). There are more male than female business travelers (Conlon, 2004). Forty-four percent of business trips is for meetings, presentations, sales, and consulting. About one in five business trips is for employees to attend conferences, seminars, and conventions (Travel Industry Association of America, 2004).

In general, studies show that it is more economically beneficial for sick employees to be absent than to be at work. Being sick at work may affect employee productivity (Kocakulah, 2002). Sickness while traveling adds additional problems. To understand the barriers that effective health university admissions recruiters may face, one should look at the following factors: motor vehicle injuries, stress, physical inactivity, poor diet, and fatigue. These factors are similar to the health risks that business travelers in general may face such as lack of exercise, illness, smoking, alcohol consumption, and sleep deprivation (DeFrank, 2000).

Review of Health Risks

Motor Vehicle Injuries

Motor vehicle accidents are among the leading causes of death for workers. In 2000, close to 24% of worker's fatalities happened while traveling for business (Pratt, 2003). Four out of five business trips are by car; only trips over 500 miles are generally made by flight (Conlon, 2004).

Though the highest number of deaths on the road between 1992 and 2000 were public transportation providers and truck drivers, 886 deaths were people in sales, 863 in services, and 651 were people with a professional specialty (Pratt, 2003). According to Healthy People 2010, vehicular accidents are preventable (Healthy People 2010, 2003). The most effective means in decreasing motor vehicular causes of death are increasing seat belt usage and limiting driving while under the influence. The highest death rate from motor vehicle accidents is in the 15 to 24 year-old age group (Healthy People 2010, 2003).

In 1997, almost 40% percent of the motor vehicle deaths were related to alcohol use (Healthy People 2010, 2003). The consumption of alcohol is the third leading cause of preventable death in the United States (Centers for Disease Control and Prevention, 2004). In fact, 2.3 million deaths are due to alcohol and about 75,000 of these are preventable deaths. Most deaths were males around 35 years of age (Centers for Disease Control and Prevention, 2004). These statistics are similar to the deaths of workers in general (Pratt, 2003). The majority of worker fatalities between 1992 and 2000 were male. The age range for the highest number of fatalities among workers is 35 to 44 (Pratt, 2003). In a 1993 study, the presence of alcohol was found in almost 13% percent, or 168, motor vehicle deaths of truck drivers (Crouch, 1993). Another study indicated that company drivers do not tend to perceive driving the morning after a heavy night's drinking to be dangerous (Davis, 2003). The National Institute for Occupational Safety and Health warns drivers not only of the risks of alcohol but also the fact that cellular phones may impair driving abilities. Safety classes should be provided to all business travelers previous to their trips (Pratt, 2003).

Stress

The estimated cost of mental illness, including stress and depression, in the United States was 160 billion dollars in 1996 (Healthy People 2010, 2003) Also, depression has been flagged as an expensive concern in occupational health (Oss, 2004). It is estimated that depression cost workforce employers 51 billion dollars from lost productivity in 2000 (Oss, 2004). In addition, mental health status such as depression and stress a can be associated with other concerns such as heart disease, cancer, diabetes,

heart attack, stroke, and a weak immune system (Healthy People 2010, 2003; Schwartz, 2004).

In a 1997 survey by Yale University, 29% of workers indicated that they felt a high level of stress at work (Barsade, 1997). Twenty-six percent of workers indicated that they were often stressed by their work in a survey by the Families and Work Institute (Bond, 1998). A 2002 study looked at occupational stress in higher education workers specifically. It looked at a large university in Cyprus and identified stress as relating to one of three groups including administrators, faculty, and coordinators (Michailidis, 2002). Stress was reported to have a very negative impact on employee's satisfaction with work, personal growth, and development in their job. These groups expressed that the strongest source of job pressure and stress was from their relationship with other people both inside and outside the office (Michailidis, 2002).

Employees with non-standard shifts reportedly suffer from more job stress, emotional exhaustion, and psychosomatic health problems than standard nine to five employees, which can lead to overall burnout (Jamal, 2004). This is particularly true of employees who work on weekends (Jamal, 2004). Women who work overtime have been found to have higher blood pressure than their nine to five counterparts. (Rau, 2004). Full-time employees report to have worse health stress factors than part-time employees or temporary employees. However, the latter express lower levels of job satisfaction than the other types of employees (Benach, 2004). In a panel of 50 business executives, travel was one of the top two identified sources of stress (Campbell, 2000).

In fact, business travelers have a higher number of medical claims for psychological treatment than their non traveling coworkers (Liese, 1997).

For business travelers, there are different kinds of stress factors that effect work productivity both on the road and in the office upon return (DeFrank, 2000). A new model shows that stress can be separated into three categories including pre-trip stress, stress on the road, and post trip stress (DeFrank, 2000; Ivencevich, 2000). Pre-trip stress can include planning the trip and leaving the office in order. Stress on the road can include in flight stress such as nausea during takeoffs and landings, in-flight airsickness, muscle tension, and earaches (DeFrank, 2000; Moline, 1998; Brocato, 1996; Jong, 1992). Post-trip stress includes getting re-accustomed to the office and family life (DeFrank, 2000; Ivencevich, 2000). Younger and less experienced business travelers tend to feel more stress on the road and tend to report more illnesses than older and more-experienced business travelers (Fisher, 1998).

A 1999 study indicated that there is a strong correlation between business travel and emotional concerns (Striker, 1999). Business travelers report stress due to isolation and the impact of travel on family to be their greatest concerns (Striker, 1999). In a study of married and non-married business travelers, 25% more married travelers found it difficult to be away from home than non-married travelers (Fisher, 1998). Family life can also create more stress before the actual travel for married business travelers (DeFrank, 2000). In fact, men report finding it difficult to get to sleep due to missing their partner (Ferrari, 2001). Business travelers with families may also be concerned with childcare planning and spending quality time with children (DeFrank, 2000). In a

2000 study, researchers found that the largest stress factors for people on the road included the negative impact of travel on family and personal life. Others complained about the heavy workload, feelings of isolation, jet lag, and health and safety concerns (Stricker, 2000).

Travel also affects the spouse and loved ones who are at home. Spouses of travelers have double the medical claims relating to stress than spouses of non-travelers (Dimberg, 2002). Female spouses with traveling husbands have expressed problems with the travel disrupting family life, causing difficulties with children, and causing the spouse to miss the traveler (Espino, 2000). Also, depression, anxiety, and sexual dysfunction may occur at the parting and reunions of the spouses (Morrice, 1985). To try to counteract the stress, it is important to have the feeling of emotional support, have a healthy diet, and exercise (Schwartz, 2004). Thirty-four percent of business travelers combine the business trip a with pleasure vacation that can help to relieve stress (Travel Industry Association of America, 2004; Schwartz, 2004). Sixty-six percent of men and 52% of women surveyed in a Westin Hotels study say that they would like to bring their family along with them on business trips (Ferrari, 2001).

Physical Inactivity and Poor Diet

Diet and lack of an exercise routine can be a stress factor while on the road (DeFrank, 2000). Many business travelers find that they eat more and drink more alcohol on the road then at home (Hilton Hotels Corporation, 1996). They also have trouble finding a time and place to exercise due to lack of routine and/or exercise facilities (DeFrank, 2000). In a 2004 survey by Westin Hotels, 61% of travelers have been

patrons of hotels that did not have an exercise facility (Kelly, 2004). Also in the survey, 53% of travelers stated that they did not like the workout facilities provided, 49% of travelers stated that the facilities were broken or in need of repairs, 46% percent stated that the exercise centers were closed at the time when the traveler wanted to use it, and 41% stated the facilities were too crowded (Kelly, 2004). To counteract this problem, Westin, Sheraton, Hilton and several other hotel companies are upgrading their facilities (Conlon, 2004). In addition, many fitness chains such as Gold's Gym and 24 hour fitness are also offering options for business travelers (Kelly, 2004; Schneider, 2003).

Exercise is also found to be the key in performance on the road. Business travelers who exercise on the road have 61% more endurance than non-exercising travelers, who suffer from a 20% drop in endurance while traveling (Kelly, 2004). Among university employees in Cyprus, the researchers found that 85% of all three groups of higher education employees did not follow exercise programs and fifteen percent rarely exercised (Michailidis, 2002).

Physical activity is also shown to be lower in professional drivers then in the general population. In addition, many professional drivers are associated with being overweight (Bigert, 2003). These groups tend to have increased risk factors for heart disease and other health conditions (Bigert, 2003). Among truck drivers responding to a 1993 survey, 73% were categorized as obese or overweight. Half of the respondents never participated in exercise and only 8% reported regular participation. In addition to their lack of exercise, these professional drivers also had poor eating habits; eighty percent ate only one to two meals per day and thirty-six percent had several snacks a day

(Korelitz, 1993). Another study found that the favorite foods of truck drivers while on the road were high fat, high calorie foods like hamburgers, chips, fruit, candy, donuts, and cookies. Few of these truck drivers reported eating the recommended five or more servings of fruits and vegetables (Holmes, 1996). Business travelers also have appalling eating habits. They may overindulge during expensive meals, skip meals, east fast food, and drink too much coffee while traveling (Houston, 2003). In the Westin Hotels survey, 40% of business travelers said they eat more on the road than at home. Also, 27% of travelers surveyed said that they have gained weight while on the road (Kavanagh, 2003). Fatigue

A poll by the National Sleep Foundation found that forty seven million adults in the U.S. are not getting the sleep that they need at night. This predicament costs industry 77 billion dollars a year in lost productivity (E.S, 2003). Professional drivers also complain of mental and physical fatigue (Hanley, 1999). Drowsy driving and sleep deprivation does result in loss of lives and serious injuries each year (Stutts, 2003). Driving drowsy was the cause of 1,773 crashes in the year 2000 (Pratt, 2003). Work factors associated with sleep or fatigue related crashes include having two or more jobs, working a night shift, or working 60 or more hours per week. Drivers who average less than five hours of sleep per night increase their risk of being in a fatigue related crash.

Drivers who have been in sleep-related crashes report that they often have trouble falling asleep (Hanley, 1999). Some may turn to beer or wine to help get good nights sleep (Conlon, 2004). They also judge the quality of their sleep to be fair or poor. In general, they are more likely to drive 20,000 or more miles per year and drive two or

more hours per day than drivers not involved in car crashes in general. The greatest risk for an accident due to fatigue occurs usually after driving for only one to two hours (Hanley, 1999). Time spent on the road in general for the average non-professional driving population is also very interesting to note. On average, twenty to twenty-four year olds spend 52 minutes a day driving. Adults 25 to 54 spend on average 64 minutes a day driving. Adults 55 to 64 spend on average 58 minutes a day driving (Time behind the wheel, 2003).

Lack of sleep can also be a source of stress (DeFrank, 2000). In a study by Hilton Hotels and the National Sleep Foundation, 55% of the people polled ranked sleep as their number one concern on the road (Hilton Hotels Corporation, 1996). It also seems that travelers who have been on the road for several years complain more about losing more sleep now than in the past (Hilton Hotels Corporation, 1996). Also, older employees complain of not feeling well rested more often than younger employees (Kerstedt, 2002). However, younger employees have more trouble waking up in the morning. Male employees have more trouble waking up than female employees. Smokers also complain of trouble waking up.

Employees with perceived higher work demands and low social support tend to have similar troubles with awakening (Kerstedt, 2002). Also employees who work overtime were found to have trouble with sleep including trouble getting back to sleep after a disturbance (Rau, 2004). Business travelers complain of less sleep than when they are in their own bed and more disrupted sleep while on the road (Ferrari, 2001). In the Westin Hotels sleep study, it was found that three-fourths of travelers claim they return

home tired and need to catch up on sleep. They complain that lack of sleep has affected their performance on the road (Ferrari, 2001). Business travelers say that it takes about 15 minutes at home to fall asleep and almost twice that when on the road.

One of the biggest problems leading to the change in sleep is the bed in the hotel room. Most business travelers surveyed by Westin hotels say they dislike something about their hotel room beds when compared to their beds at home. Women tend to miss their bed at home the most when on the road. Women are more likely than men to need to catch up on sleep when returning from a business trip (Ferrari, 2001).

Summary

The most dangerous risk for business travelers may be death by motor vehicle. Motor vehicle accidents are among the leading causes of death in the work place (Pratt,2003). These deaths could be caused by drinking or fatigue on the road (Crouch, 1993; Hanley, 1999; Stutts, 2003; Pratt, 2003; Conlon, 2004; DeFrank, 2000; Kerstedt, 2002; Rau, 2004; Ferrari, 2001; Davis, 2003). Fatigue could be caused by poor health behaviors on the road including sleep deprivation, poor diet, stress, and lack of exercise (DeFrank, 2000). Future studies need to be done with the business traveling population to identify risk factors on the road and how to counteract them with health promotion (Ivencevich, 2000).

CHAPTER III

METHODOLOGY

Admissions counselors were invited to participate in an online survey at the conclusion of the 2004 Texas Association of Collegiate Registrars and Admissions Officers (TACRAO) college fair season, which lasted from September to November 2004. The sample was based on convenience. The researcher sent a letter of introduction to the study and invitation to participate in the study to the TACRAO list-serv, to which Admissions Counselors subscribe. The letter contained a link to the survey itself. The survey was created using Survey Monkey, an online service available at surveymonkey.com. Participants who chose to take part in the study would click the link on the letter and then complete the survey. The survey was available for admissions counselors to fill out from November 22, 2004 to December 20, 2004. (Refer to Appendix A for the letter sent to the list-serv, and Appendix B for a copy of the survey as seen on surveymonkey.com.)

Population and Sample

The population consisted of admissions counselors who work in the state of Texas and subscribe to the TACRAO list-serv. From the total number of list-serv subscribers who received the letter, 222 admissions counselors chose to participate in this study.

Age

The mean age of admissions counselors who chose to participate was 30.6 years. The standard deviation was 8.61. The mode age was 23 years old. The youngest participant was 21 and the oldest participant was 65. Five of the participants chose not to identify an age.

Race

Of the 222 total participants, 221 chose to identify with a race. Many of the participants, 66.5%, identified their race as white. This was followed with 17.6% identifying themselves as Hispanic or Latino, 10.4% identified themselves as African American or Black, 3.6% identified themselves as other or mixed race, and 1.8% identified themselves as Asian or Pacific Islander. None of the participants identified themselves as American Indian or Alaska Native.

Marital Status

All participants chose to indicate their marital status. Many of the admissions counselors surveyed identified themselves as single, 43.2% identified themselves as married, 5.4% indicated that they had been separated or divorced, 2.7% identified that they live with a partner, and .5% of the sample self-identified as a widow.

Children

The majority of the sample surveyed, 79.3%, indicated that they did not have children, and 20.7% of the sample indicated that they did have children.

Travel Time

Of the 218 participants who answered this question, 50.9% indicated that they had been away from home five or more weeks during the fall 2004 TACRAO season, 15.6% indicated that they had been away from home for four weeks, 10.1% indicated that they had been away from home three weeks, 7.3% indicated that they had been away from home two weeks, 7.8% indicated that they had been away from home one week, and 8.3% indicated that they had been away from home less than one week during the fall 2004 TACRAO season.

Protection of Human Participants

To ensure confidentiality, no identifying information was asked on the survey itself. However, when working with email and downloading transactions, there is always a potential for loss of confidentiality. The researcher indicated this concern in the participation letter that was posted on the list-serv. The researcher tried to minimize this risk by using a list-serv rather than person-to-person email. Also, the researcher purchased an SSL encryption feature that encrypted the surveys during submission to the site. Once the surveys were completed on Survey Monkey, the data was kept on servers that were in a locked cage which required a pass card and biometric recognition for entry at Berbee Networks. Barbee Networks also had digital surveillance equipment and was staffed 24 a day and seven days a week. Risk of loss of confidentiality through email transactions and IP tracing was minimized because Survey Monkey did not keep IP addresses.

Data Collection Procedures

A participation letter was submitted to the TACRAO list-serv on November 22, 2004. The research letter provided information about the study and invited admissions counselors to participate. Those interested were asked to complete a survey on surveymonkey.com that was created by the researcher. The study was conducted from November 22, 2004 to December 20, 2004. Data analysis began after December 20, 2004.

Instrumentation

The survey included two scales, each with five demographic items and 20 behavioral items. The two scales were identical; however, one measured health related behaviors while the participant was on the road and the other measured the same behaviors while the participant was at home. The behavior questions were on driving habits, diet choices, safety practices, physical fitness levels, amount and quality of sleep, alcohol intake, cigarette consumption, mental health issues, and general illness questions. A paper copy of a draft version of the survey was pilot-tested with eight admissions counselors. The admissions counselors were retested with the same version of the survey one week later to ensure reliability. The draft version of the survey incorporated both positively and negatively worded questions. For the purpose of accurate testing of internal consistency, the researcher separated the negative worded items from the positive worded items. A Cronbach's alpha internal consistency measure was conducted on each scale. The Cronbach's alpha for the positively worded questions in the time spent on the road during the first test of the pilot study was .57. The Cronbach's alpha for the

positively worded questions in the time spent off the road scale was .77. The Cronbach's alpha for the negatively worded question in the time spent on the road was .57. The Cronbach's alpha for the negatively worded questions in the time spent off the road scale was .53. The correlation between the test and the retest was .89 for the scale of time spent off the road and .88 for the scale of time spent on the road. The internal consistency alphas documented several flaws which were fixed on the final version of the survey. For example, several questions in the survey did not have five answer choices. Also, the positively worded questions were changed to match the wording for the rest of the questions. These changes with the survey were expected to help increase the internal consistency alphas in the study.

In the final study, the Cronbach's alpha for the time spent on the road scale was .67. The Cronbach's alpha for the time spent off the road scale was .68. The Cronbach's alpha for the total final survey was .75. It is important to remember that the survey dealt with a mix of behaviors. When dealing with behaviors, it is difficult to have a high reliability score due to the fact that the behaviors of humans are not generally stable.

Data Analysis

Measures of central tendencies were computed on the responces to each question on the survey. Each item had a five-point forced-choice answer. A responce of 1-2.9 indicated a healthier behavior. A score of 3-5 indicated a less healthy behavior. A T-test was used to determine if differences existed between on and off the road health behaviors. A correlation was computed to determine the relationship between time on the road and negative health behaviors.

Summary

Two hundred and twenty-two admissions counselors chose to participate in this study by following a link given to them via the TACRAO list serv. The link lead them to a survey on the Survey Monkey website. On Survey Monkey, the responses of the survey were kept confidential and safe. The majority of the population surveyed indicated that they were white, did not have children, and were not married. They had a mean age of 30.6 years and the majority had been away from home for more than five weeks during the Fall 2004 TACRAO season. The instrument was pilot tested in August 2004 and was found to have flaws. An improved version of the instrument was used in the final study. The instrument reliability estimates documented moderate to high reliability and moderate internal consistency.

CHAPTER IV

RESULTS

During the time from November 22, 2004 to December 20, 2004, 222 admissions recruiters chose to answer a survey that was posted on surveymonkey.com. The survey consisted of 18 behavioral items. This section is a review of the results.

Individual Behaviors

The 222 respondents were asked to respond to two scales with 18 behaviors each One hundred eighty-eight respondents chose to answer question 7, the first of the behavioral questions. (See Figure 1). During the fall 2004 Texas Association of Collegiate Registrars and Admissions Officers (TACRAO) season, 45% of admissions recruiters felt they drove three to four hours each day while "on the road," 27% indicated that they had driven 4-5 hours each day, 18% indicated that they had driven 6 or more hours each day. The response mean score was 3.49. During the fall 2004 TACRAO season, many admissions recruiters felt as if they drove less than one hour while "off the road," 48% of the respondents indicated they drove less than one hour, 39% of the respondents indicated that they had driven 1-2 hours each day. The response mean was 1.71.

One hundred eighty-eight respondents chose to answer question number 8. (See Figure 2.) During the fall 2004 TACRAO season, 30% of the respondents felt they drove 30 to 60 minutes six to seven days a week while "on-the-road," 27% indicated that they

had driven 30-60 minutes five days a week, 25% indicated that they had driven 30-60 minutes three to four days a week. The response mean was 3.60. During the fall 2004 TACRAO season, 32% of respondents drove 30 to 60 minutes less than one day per week while "off-the-road," 30% indicated that they had driven 30-60 minutes one to two days a week. The response mean was 2.45.

One hundred eighty-eight respondents chose to answer question number 9. (See Figure 3). During the fall 2004 TACRAO season, 43% of respondents drove three or more hours one to two days per week while "on-the-road," 24% indicated that they drove three or more hours three to four days a week. The response mean was 2.39. During the fall 2004 TACRAO season, 85% of respondents indicated that they drove three or more hours less than one day per week while "off-the-road." The response mean was 1.23.

One hundred eighty- eight respondents chose to answer question number 10. (See Figure 4). During the fall 2004 TACRAO season, 32% of the respondents on average felt as if they had driven drowsy one to two times while "on-the-road". The response mean was 2.84. During the fall 2004 TACRAO season, 43% of respondents felt if they have never driven drowsy "off-the-road," 41% indicated that they have driven drowsy one to two times while "off-the-road". The response mean was 1.81.

One hundred-eighty eight respondents chose to answer question number 11. (See Figure 5). During the fall 2004 TACRAO season, 48% of respondents felt as if they ate meals in fast food restaurants three to seven times a week while "on-the-road." The response mean was 3.13. During the fall 2004 TACRAO season, 41% of respondents felt as if they ate meals in fast food restaurants one to two times a week while "off-the-road"

and 34% indicated that they are less than one time a week in a fast food restaurant. The response mean was 1.98.

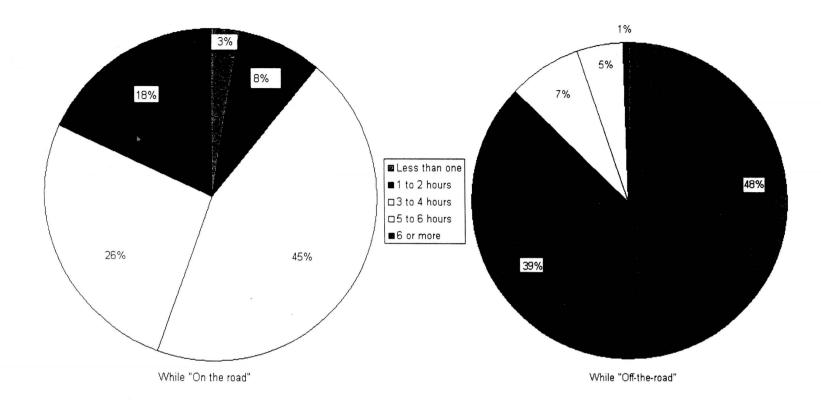


Figure 1: How Many Hours Do You Drive Each Day?

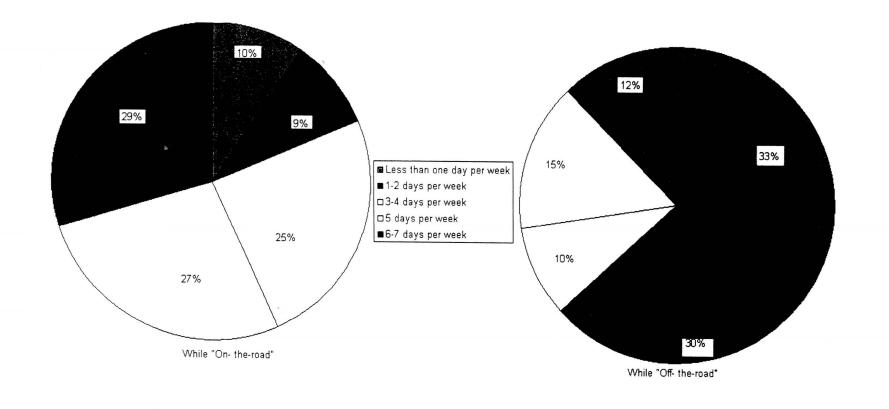


Figure 2: How Many Days A Week Do You Drive 30-60 Minutes?

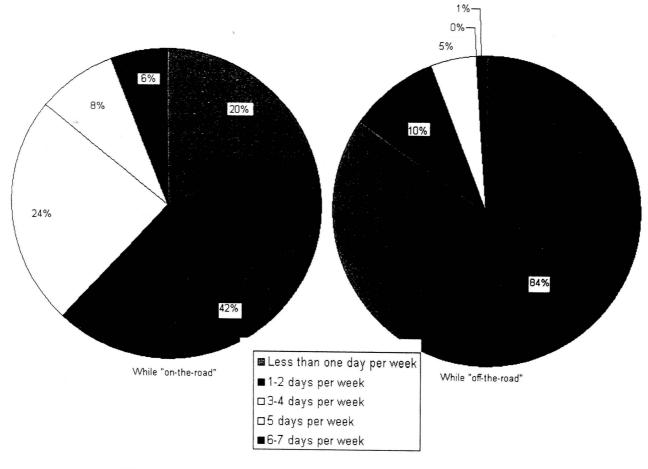


Figure 3: How Many Days A Week Do You Drive 3 or More Hours?

One hundred eighty-eight respondents chose to answer question number 12. (See Figure 6). During the fall 2004 TACRAO season, 46% of respondents felt as if they usually ate high fat foods and 23% indicated that sometimes they ate high fat food while "on-the-road". The response mean was 3.71. During the fall 2004 TACRAO season, 44% of the respondents felt as if they sometimes ate high fat food and 37% indicated that they rarely eat high fat food while "off-the-road." The response mean was 2.69.

One hundred eighty respondents chose to answer question number 13. (See Figure 7). During the fall 2004 TACRAO season, 96% of respondents felt as if they always wear their seatbelt while driving "on-the-road." The response mean was 1.07. During the fall 2004 TACRAO season, 94% of respondents felt as if they always wear their seatbelt while driving "off-the-road." The response mean was 1.11.

One hundred eighty respondents chose to answer question number 14. (See Figure 8). During the fall 2004 TACRAO season, 88% of respondents indicated that they always wear their seatbelt while riding "on-the-road." The response mean was 1.15. During the fall 2004 TACRAO season, 86% of respondents indicated that they always wear their seatbelt while riding in a car "off-the-road". The response mean was 1.20.

One hundred eighty respondents chose to answer question number 15. (See Figure 9). During the fall 2004 TACRAO season, 57% of respondents indicated that they exercised for at least 30 minutes 0 days a week and 31% of respondents indicated that they exercise at least 30 minutes 1 to 2 days a week while "on-the-road.". The response mean was 4.42. During the fall 2004 TACRAO season, 32% of respondents indicated that they exercised for at least 30 minutes 3 to 4 days a week and 27% of the respondents

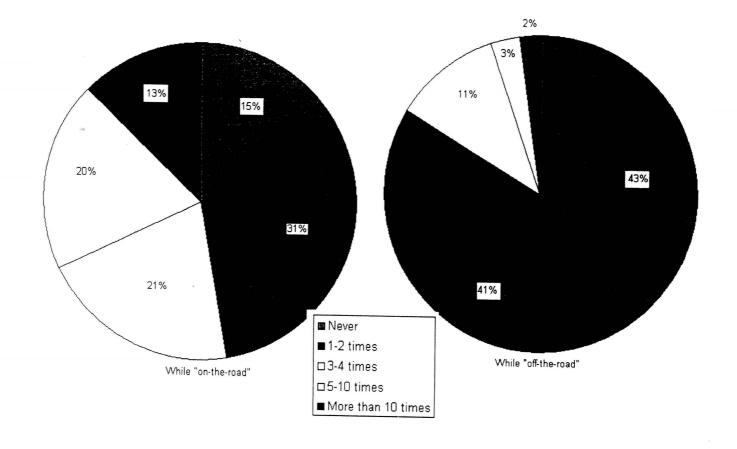


Figure 4: How Many Times In A Week Have You Driven Drowsy?

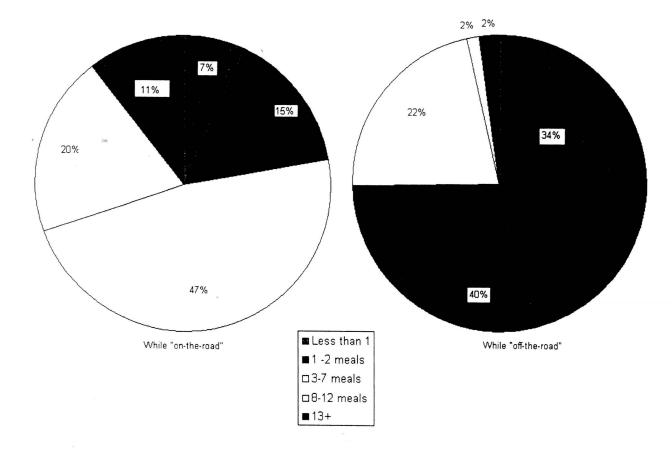


Figure 5: How Many Meals A Week Do You Eat In Fast Food Restaurants?

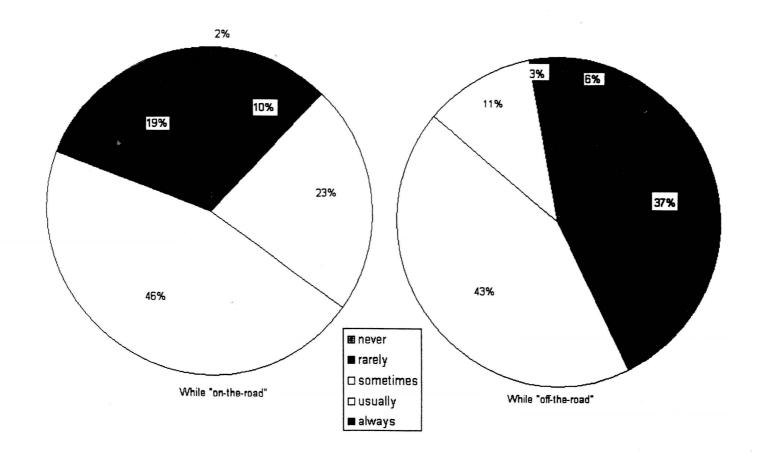


Figure 6: How Often Do You Eat High Fat Foods?

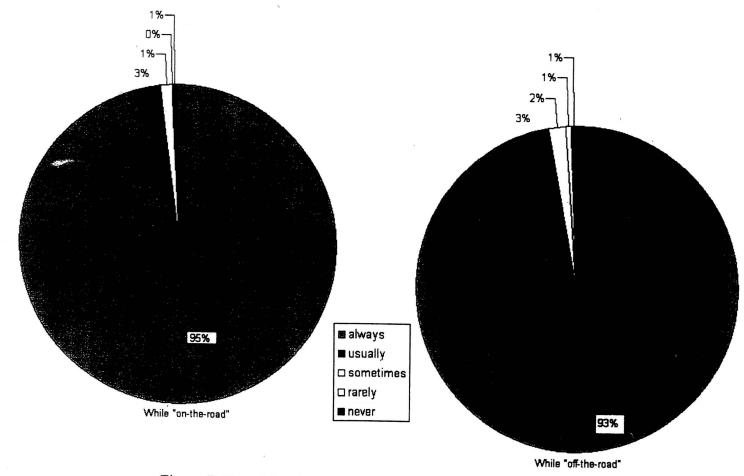


Figure 7: How Often Do You Wear Your Seatbelt While Driving?

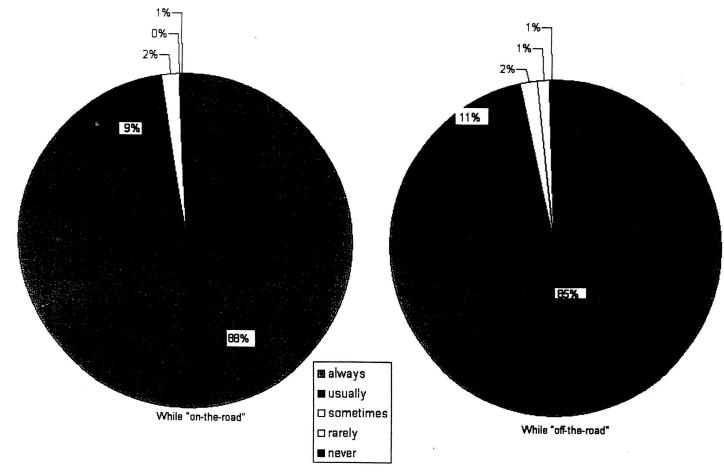


Figure 8: How Often Do You Wear Your Seatbelt While Riding?

indicated that they exercised for at least 30 minutes 1 to 2 times a week while "off-the-road." The response mean was 3.65.

One hundred eighty respondents chose to answer question number 16. (See Figure 10). During the fall 2004 TACRAO season, 64% of the respondents did stretching exercises 0 days a week and 22% indicated that they did indicated that they did stretching exercises one to two days a week while "on-the-road". The response mean was 4.41. During the fall 2004 TACRAO season, 39% of respondents did stretching exercises zero days a week, 26% indicated that they did stretching exercises one to two days a week, and 18% indicated that they did stretching exercises three to four days a week while "off-the-road." The response mean was 3.83

One hundred eighty respondents chose to answer question number 17. (See Figure 11). During the fall 2004 TACRAO season, 69% of respondents indicated that they did heavy exercise zero days a week and 23% of respondents indicated that they do heavy exercises one to two days a week while "on-the-road." The response mean was 4.59. During the fall 2004 TACRAO season, 41% of respondents indicated that they exercised 0 days a week and 26% indicated that they did heavy exercise 1 to 2 days a week "off-the-road." The response mean was 3.99.

One hundred eighty respondents chose to answer question number 18. (See Figure 12). During the fall 2004 TACRAO season, 36% of respondents indicated that they sometimes have stress interfere with their quality of life and 35% of indicated that stress usually interferes with quality of life "on-the-road." The response mean was a 3.47.

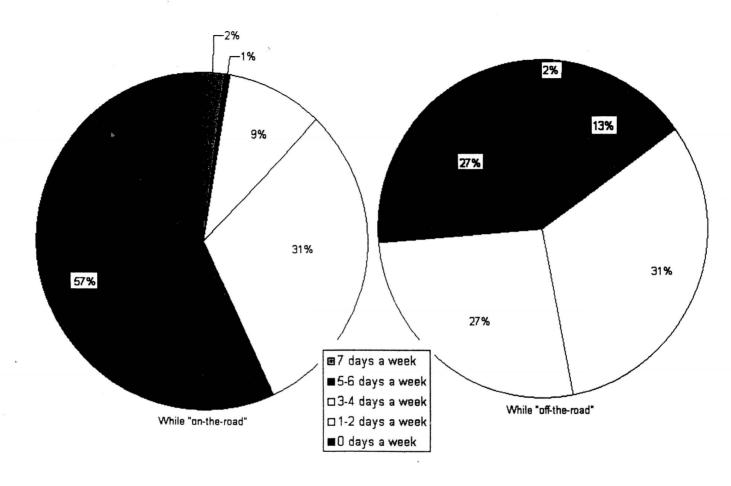


Figure 9: How Many Days a Week Have You Exercised For 30 Minutes?

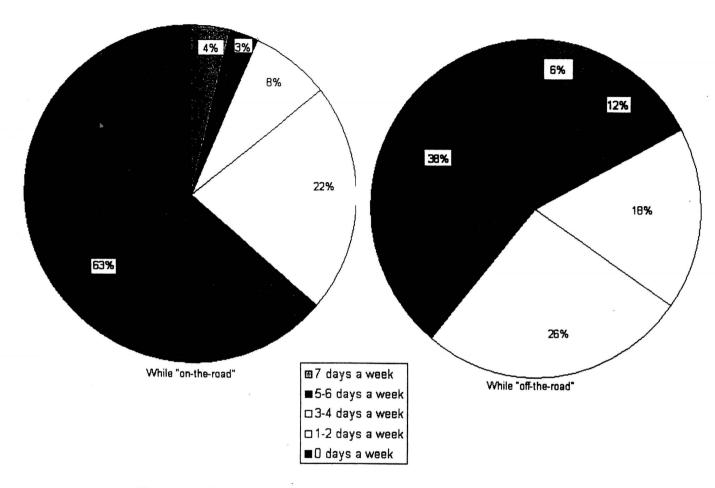


Figure 10: How Many Days A Week Do You Do Stretching Exercises?

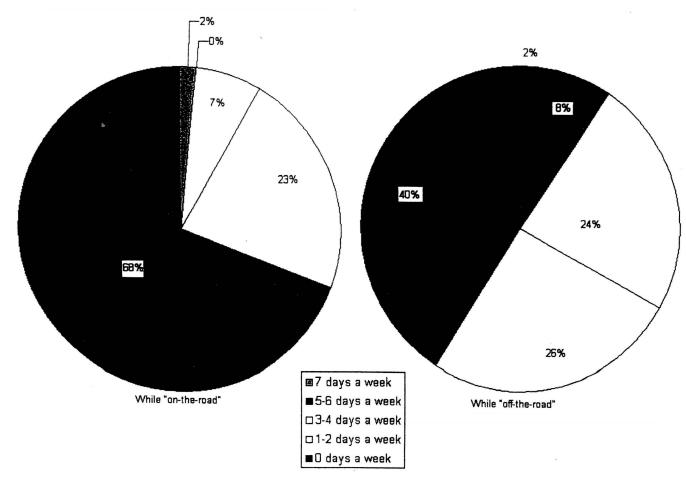


Figure 11: How Many Days A Week Do You Do Heavy Exercise?

During a fall 2004 season, 44% of respondents indicated that they sometimes have stress interfere with their quality of life and 30% indicated that stress rarely interferes with quality of life while "off-the-road." The response mean was 2.95.

One hundred seventy six respondents chose to answer question number 19. (See Figure 13). During the fall 2004 TACRAO season, 45% of respondents had less than 6 hours of sleep and 43% had 6 to 7 hours of sleep while "on-the-road." The response mean was 4.34. During the fall 2004 TACRAO season, 56% of the indicated that had 7 to 8 hours of sleep and 31% indicated they had 6 to 7 hours of sleep while "off-the-road." The response mean was 3.45.

One hundred seventy six respondents chose to answer question number 20. (See Figure 14). During the fall 2004 TACRAO season, 63% of the respondents indicated that they feel as if they need 7 to 8 hours of sleep "on-the-road", and 70% indicated that they need 7 to 8 hours of sleep "off-the road". The response mean "on-the-road" and "off-the-road" was 3.07.

One hundred seventy six respondents chose to answer question number 21. (See Figure 15). During the fall 2004 TACRAO season, 44% of indicated that they have satisfactory sleep and 31% indicated that they have unsatisfactory sleep while "on-the-road." The response mean was 3.36. During the fall 2004 TACRAO season, 49% of respondents indicated they have good sleep and 28% indicated that they have satisfactory sleep. The response mean was 2.22.

One hundred seventy-six respondents chose to answer question number 22. (See Figure 16). During the fall 2004 TACRAO season, 32% of respondents indicated that

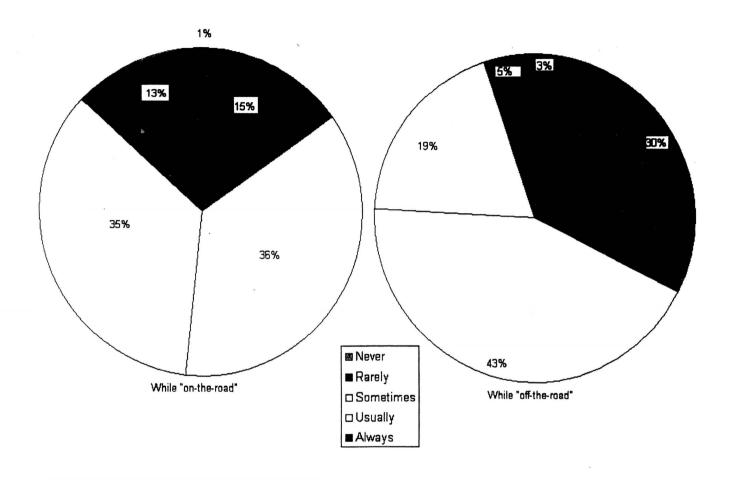


Figure 12: How Often Does Stress Interfere With Your Quality Of Life?

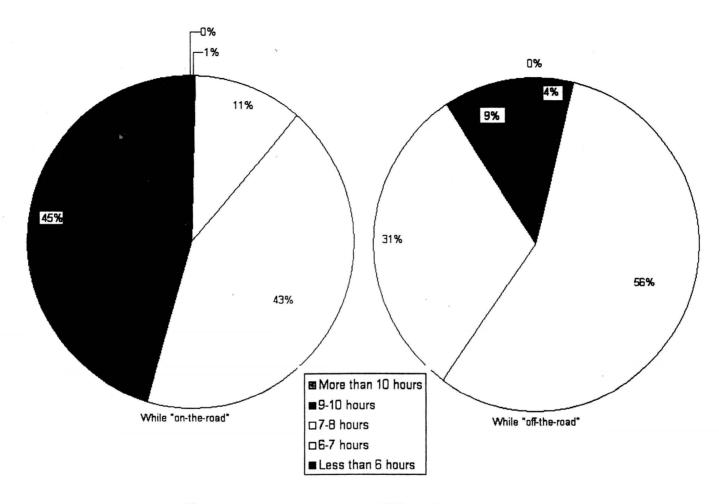


Figure 13: How Many Hours Of Sleep Do You Get At Night?

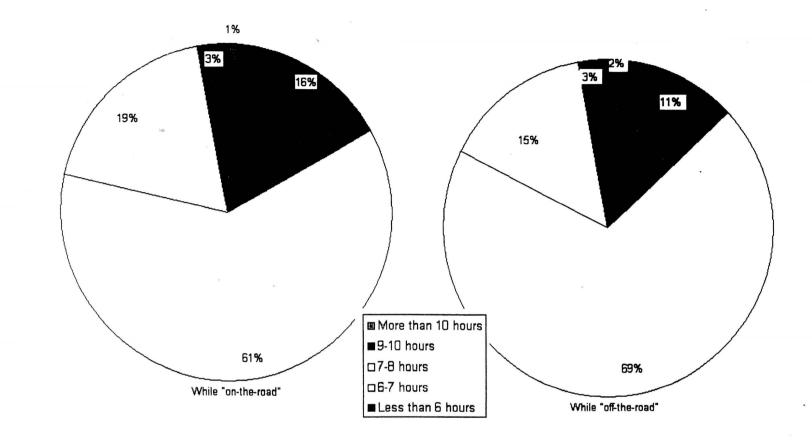


Figure 14: How Many Hours Of Sleep Do You Feel You Need?

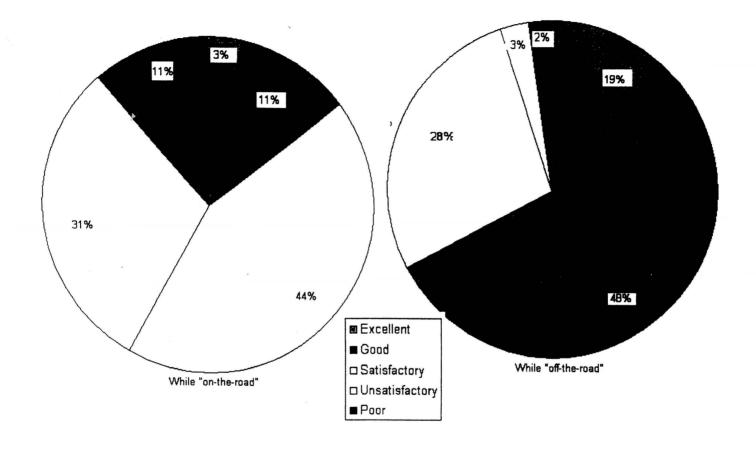


Figure 15: How Would You Rate Your Quality Of Sleep?

they have 1 to 7 drinks during a typical week and 28% indicated that they drink less than one drink while "on-the-road." The response mean was 2.32. During the fall 2004 TACRAO season, 40% of respondents indicated that they have 1 to 7 drinks and 35% of the respondents indicated that they drink less than one while "off-the-road." The response mean was 2.34.

One hundred seventy six respondents chose to answer question number 23. (See Figure 17). During the fall 2004 TACRAO season, most admissions recruiters felt as if they never use tobacco products while "on-the-road." Eighty-seven percent (153 people) of the 176 respondents indicated that they never use tobacco products while "on-the-road." The response mean was 1.33. Refer to Figure 33. During the fall 2004 TACRAO season, 86% of respondents indicated that they never use tobacco products while "off-the-road." The response mean was a 1.31.

One hundred seventy five respondents chose to answer question number 24. (See Figure 18). During the fall 2004 TACRAO season, 83% of respondents indicated that they had missed work due to illness less than 1 day "on-the-road." The response mean was 1.23. During the fall 2004 TACRAO season, 73% of respondents indicated that they felt as if they missed work due to illness less than 1 day "off-the-road." The response mean was 1.33.

One hundred seventy five respondents chose to answer question number 25. (See Figure 19). During the fall 2004 TACRAO season, 53% of respondents felt as if they had been ill enough to miss work but did not take off work less than 1 day and 32% of respondents indicated that they have been sick enough to miss work but did not take time

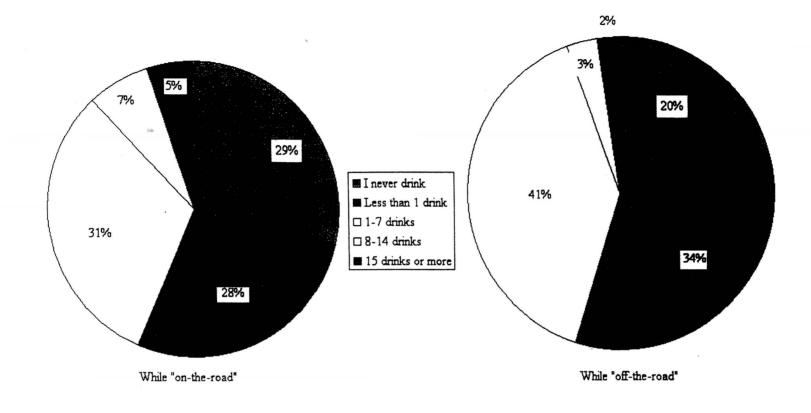


Figure 16: How Many Alcoholic Drinks Do You Have In A Week?



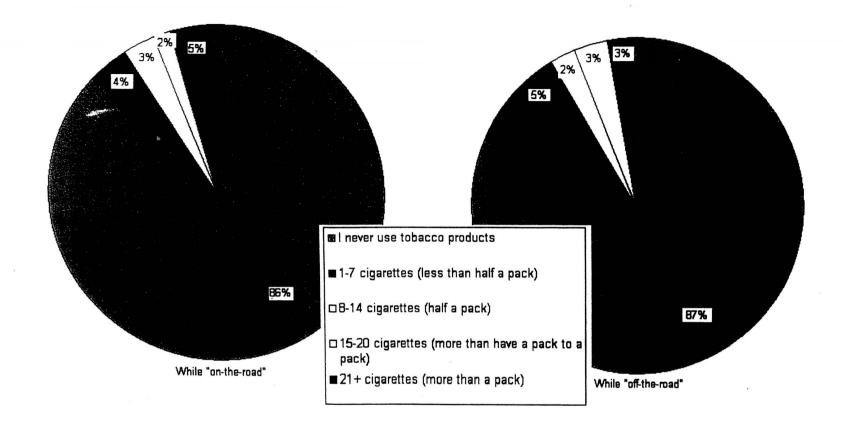


Figure 17: How Many Cigarettes Do You Smoke In A Week?

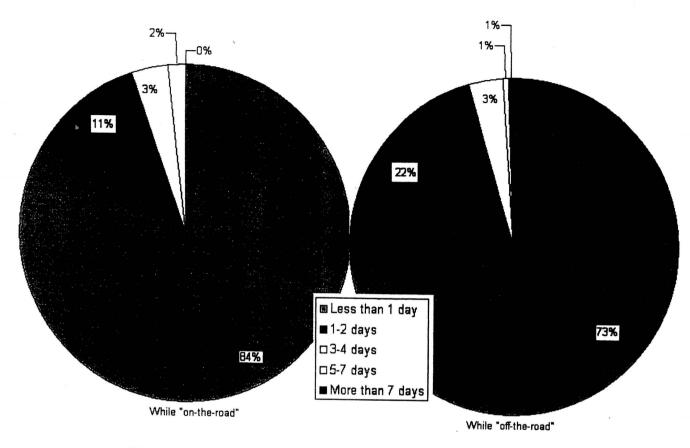


Figure 18: How Many Days Of Work Do You Miss Due To Illness?



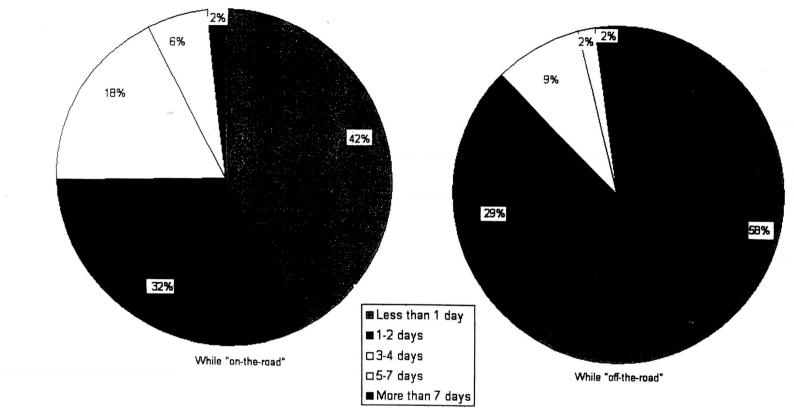


Figure 19: How Many Days A Week Have You Been Ill But Did Not Take Time Off From Work?

off 1 to 2 days while "on-the-road". The response mean was 1.91. During the fall 2004 TACRAO season, 58% of respondents had been ill enough to miss work but did not take off work less than one day while "off-the-road." Twenty-nine percent (51 people) of the 175 respondents indicated that they have been sick enough to miss work but did not take time off one to two days while "off-the-road". The response mean was 1.61.

Differences in Health-Related Behaviors

A paired sample t- test was computed to determine differences in total health behaviors on the road as compared to totally health behaviors off the road. The mean number of the total health behaviors on the road, 53.61, was more that the mean number of the health behaviors off the road, 41.88. This difference was statistically significant, p = .000. (See Table 1)

The individual behavioral questions were also compared on and off the road. The mean number of hours driven each day when off the road score, 1.71, was half of the number of hours driven each day when on the road score, 3.49. This difference was statistically significant, p=.000. (See Table 1). The mean days per week driven thirty to sixty minutes when off the road score, M= 2.45, was less than the mean days per week driven thirty to sixty minutes when on the road score, 3.60. This difference was statistically significant, p=.000. (See Table 1). The mean days per week driven three or more hours when off the road score, 1.23, was less than the mean days per week driven three or more hours when on the road score, 2.39. This difference was statistically significant, p=.000. (See Table 1).

The mean times the participants drove drowsy when off the road score, 1.81, was less than the mean times the participants drove drowsy when on the road score, 2.84. The difference was statistically significant, p=.000. (See Table 1). The mean meals a week eaten at fast food restaurants when off the road score, 1.98, was less than the mean meals a week eaten at fast food restaurants when on the road score, 3.13. This difference was statistically significant, p=.000. (See Table 1).

Table 1
Differences in Health-Related Behaviors

	Mean Score Overall Health-Bo	N	St Dev		
0 1	Overall nealth-be	Ellaviois			
On the		100	10.00		
Road	53.61	188	10.99		
Off the					
Road	41.88	188	9.23		
t=21.02,	df=187, p=.000				
	Hours driven ea	ch day			
On the					
Road	3.29	188	0.97		
Off the					
Road	1.71	188	0.84		
t = 20.56	df=187,				
p=.000	,				
P	Days driven 30 to	60 min			
On the					
Road	3.60	188	1.25		
Off the	5.00	100	1.20		
Road	2.45	188	1.40		
t=9.52, d		100	1.10		
p=.000	1-107,				
) dui 2 on m	ara haur	G		
	Days driven 3 or m	ore nour	S		
On the	2.20	100	1.07		
Road	2.39	188	1.07		
Off the	4.00	100	0.64		
Road	1.23	188	0.64		
	, df=187,				
p = .000					
Drowsy Driving					
On the					
Road	2.84	188	1.27		
Off the					
Road	1.81	188	0.64		
t=11.92,	df=187,				
p=.000	*				
1					

Table 1 (continued) Difference in Health- Related Behaviors Mean						
		N St I	Dev			
Meals eaten at						
On the	1 ast 1 ood	Rostauran				
Road	3.13	188	1.01			
Off the	3.13	100	1.01			
Road	1.98	188	0.90			
t=16.064, df=187,	1.70	100	0.50			
p=.000						
•	od Consum	ntion				
On the	ou Consum	ption				
Road	3.71	188	0.94			
Off the	3.71	100	0.74			
Road	2.69	188	0.84			
t=16.218, df=187,	2.07	100	0.04			
p=.000						
	sage while	driving				
On the	sage willie	dirving				
Road	1.07	188	0.40			
Off the	1.07	100	0.10			
Road	1.11	188	0.48			
t=-2.484, df=187,	1.11	100	0.10			
p=.014						
	sage while	riding				
On the	ibage willie	1141115				
Road	1.15	188	0.48			
Off the	1.10					
Road	1.20	188	0.57			
t=-3.069, df=187,	1.20					
p=.002						
Exercise for	at least 30	minutes				
On the						
Road	4.42	180	0.82			
Off the						
Road	3.64	180	1.06			
t=12.011, df=179,						
p=.000						
1						

Table 1 (continued) Difference in Health- Related Behaviors						
	Mean					
	Score	N	St Dev			
	Stretching ex	cercises				
On the						
Road	3.83	180	1.21			
Off the						
Road	4.41	180	0.98			
t=7.373, d	f=179,					
p = .000						
•	Heavy exe	ercise				
On the	•					
Road	4.59	180	0.72			
Off the						
Road	3.99	180	1.03			
t=9.549, d			2,00			
p=.000	1 1/2,					
•	tress interferin	o with Life	2			
On the	iress interreting	g with Life				
Road	3.47	180	0.91			
	3.47	100	0.91			
Off the	2.05	100	0.80			
Road	2.95	180	0.89			
t=7,631, d	f=1/9,					
p=.000						
	ours of sleep e	xperience	1			
On the						
Road	4.34	176	0.69			
Off the						
Road	3.45	176	0.72			
t=13.040,	df=175,					
p = .000						
Hours of sleep felt they needed						
On the						
Road	3.07	176	0.69			
Off the						
Road	3.07	176	0.65			
	175, p=.882					
, a, p 1002						

Table 1 (continued) Difference in Health- Related Behaviors Mean					
	Score	N	St Dev		
(Quality of S		St DCV		
On the	Quality of E	лсер			
Road	3.36	176	0.93		
Off the	3.30	170	0.93		
	2.22	176	0.86		
Road	2.22	170	0.80		
t=14.718, df=1	75,				
p=.000					
	cohol consu	mption			
On the					
Road	2.32	176	1.11		
Off the					
Road	2.34	176	0.91		
t=197, df=17	5,				
p = .844					
Cig	arette consi	ımption			
On the					
Road	1.33	176	0.97		
Off the					
Road	1.31	176	0.90		
t=.654, df=175	5, p=.514				
Days missed due to illness					
On the					
Road	1.23	175	0.59		
Off the	1.25				
Road	1.33	175	0.63		
t=-1.621, df=174, p=.107 Days working while ill					
On the	3 WOIKING	*******			
Road	1.91	175	0.99		
	1.71	175	0,77		
Off the	1 61	175	0.89		
Road	1.61	1/3	0.09		
t=4.32, df=174	i. p=.000				

The mean fatty foods consumed when off the road score, 2.69, was less than the mean fatty foods consumed when on the road score, 3.71. The difference was statistically significant, p=.000. (See Table 1).

The mean seatbelts while driving in a car when off the road score, 1.11, was very similar to the mean seatbelts while driving in a car when on the road score, 1.07. The difference was significant, p=.014. (See Table 1). The mean seatbelts while in a car while off the road score, 1.20, was similar to the mean seatbelts while riding in a car when on the road score, 1.15. The difference was statistically significant, p=.002. (See Table 1)

The mean exercise for at least thirty minutes while off then road score, 3.64, was less than the mean exercise for a least thirty minutes while on the road score, 4.42. The difference was statistically significant, p=.000. (See Table 1) The mean stretching exercises while off the road score, 4.41, was compared to the mean stretching exercises while on the road score, 3.83, There difference was statistically significant, p=.000. (See Table 1). The mean health behavior score for heavy exercise while off the road,3.99, was less the mean health behavior score for heavy exercise while on the road, 4.59. The difference was statistically significant, p=.000. (See Table 1).

The mean health behavior score for stress reported to interfere with life off the road, 2.95, was less than the mean health behaviors score for stress reported to interfere with life on the road, 3.47. The difference was statistically significant, p=.000. (See Table 1).

The mean health behavior score for hours of sleep participants experienced when off the road, 3.45, less than the mean health behavior score for hours of sleep participants experienced when of the road, 4.34. This difference was statistically significant, p= .000. (See Table 1). The mean health behavior score for hours of sleep participants felt that they needed at night when off the road, 3.07, was the same as the mean health behavior score for hours of sleep participants felt that they needed at night when on the road, 3.07. This difference was not statistically significant, p= .882. (See Table 1). The mean quality of sleep when off the road score, 2.22, was less than the mean quality of sleep when on the road score, 3.36. This difference was statistically significant, p= .000. (See Table 1).

The mean health behavior score for alcoholic drink consumption while off the road, 2.34, was similar to the health behavior score for alcoholic drink consumption while on the road, 2.32. This difference was not statistically significant, p= .844. (See Table 1). The mean health behavior score for cigarette smoking while off the road, 1.31, was similar to the mean health behavior score for cigarette smoking while on the road, 1.33. This difference was not statistically significant, p= .514. (See Table 1).

The days missed due to illness while off the road score, 1.33, was not less than the days missed due to illness while on the road score, 1.23. This difference was not statistically significant, p=.107. (See Table 1) The days that the participants felt they were ill enough to miss work but did not take time off when off the road score, 1.61, was less than the days participants felt they were ill enough to miss work but did not take time off when on the road score, 1.91. This difference was statistically significant, p=.000.

Relationship between health-related behaviors on the road and time

The Pearson correlation of behaviors on the road and weeks on the road was .324. This indicated a very low relationship between time on the road and health-behaviors.

This correlation was not statistically significant.

CHAPTER IV

SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

The purpose of this study was to identify what differences admissions recruiters experience in their health behaviors when traveling at work and when at home. Factors including driving time, seatbelt use, sleep, nutrition, stress, alcohol and cigarette use, and general illness were examined. This chapter examines the data presented in Chapter IV and provides recommendation based on the outcome of the study.

Summary

This study used a convenience sample and thus can not be generalized to the entire population of university admissions recruiters. The study also assumed that the subjects were honest in their responces. However, the study does provide a look into the sample of admissions recruiters who chose to answer the study. The study provides baseline information for the demographics and behaviors of this population. Two hundred and twenty-two admissions counselors chose to participate in this study by following a link given to them via the TACRAO list serv to a survey on surveymonkey.com from November 22, 2004 to December 20, 2004. Responses of the survey were kept confidential and safe. Demographic questions of this population indicated that many people in sample were white, did not have children, were not married, had a mean age of 30.6 years and had been away from home for more than five weeks during the Fall 2004 TACRAO season. Each behavioral item on the survey had a five-point forced-choice answer. Measures of

central tendencies were computed for each response. A t- test was used to determine if differences existed between on and off the road health behaviors. Also, individual t-test were used on each behavioral item to determine on and off the road differences. Lastly, a Pearson r value correlation was computed to identify the relationship between health behaviors and amount of time spent on the road.

Conclusions

Results of the data analysis were computed to identify several conclusions including identification of this sample's positive and negative health behaviors, change in behaviors on and off the road, and any correlation between time of the road and healthy behaviors.

Health-Related Behaviors

Negative health behaviors recruiters identified, as calculated by the mean response score, while traveling included the following: driving 4 to 5 hours daily, driving thirty to sixty minutes, driving three or more hours, driving drowsy, eating fast food meals, eating high fat foods, not exercising for at least 30 minutes, poor stretching exercises, not doing heavy exercises, hours of sleep and quality of sleep. Negative health behaviors identified while at home included the following: not exercising for at least 30 minutes, poor stretching exercises, and not doing heavy exercises.

Change in Health-Related Behaviors

Hypothesis one: There will be no statistically significant difference in the healthrelated behaviors of admissions recruiters while traveling in the state of Texas when compared to their behaviors while at home at their universities or colleges. This null hypothesis was rejected based on the results of a paired samples t-test.

The sum of the off the road was less than the sum of the on the road scores indicating less healthy behavior on the road. Thus, there is a difference in the health-related behavior of admissions recruiters while traveling as compared to at home.

In addition when looking at the paired sample t-test results for each question, several health-related behaviors of the admissions recruiters differ on the road as compared to their behaviors off the road. The following behaviors differed significantly on and off the road: hours driven each day, days driven thirty to sixty minutes, drowsy driving, eating in fast food restaurants, eating high fat foods, wearing seat belts while driving, wearing seat belts while riding in a car, exercising for at least thirty minutes, performing stretching exercises, performing heavy exercises, having stress interfere with quality of life, hours of sleep, quality of sleep, and days the participants felt ill enough to miss work but did not take time off. In the behaviors that were found to be significantly different on and off the road, the means were lower for off the road indicating healthier behavior.

Relationship Between Health-Related Behaviors and Time

Hypothesis 2: there will be no statistically significant correlation between the amount of time spent on the road in business travel and the health-related behaviors. This null hypothesis was accepted. The correlation indicated a very low relationship between negative behaviors and amount of time on the road. The non rejection of the null hypothesis indicates that the relationship between time on the road and negative

behaviors may occur by chance. This study infers that being on the road itself will produce negative behaviors in admissions recruiters.

Discussion and Implications

This study may be the first to look at the health behaviors of admissions counselors during travel and at home. The results of this study provide some direction for health promotion programs for individuals in the population. Also, since many studies of this nature have not been done with business travelers in general, this study provides interesting conclusion and discussion on how travel affects health.

Business travelers are at risk for motor vehicle injuries, stress, physical inactivity, poor diet, and fatigue. In fact, admissions recruiters differ in these behaviors when on the road to their home lives. The surprise finding of this study is that the amount of travel time on the road does not correlate with negative health behaviors. Thus, being on the road, in general, regardless of the length of the trip, has significant effects on behaviors for admissions recruiters. Because the recruiters exhibit more positive health behaviors at home, these are the behaviors that health educators can help admissions recruiters to emulate while on the road. Interventions can be geared toward changing the following behaviors on the road: sleep, nutrition, and exercise. Since healthier behaviors are practiced while at home, educated efforts should include how to keep positive behaviors while traveling.

Admissions recruiters may not know how to continue positive health behaviors in a different environment. The environment that admissions counselors have while traveling is much different than at their home. For example, they may have more access

to sweets and fast food while traveling than at home. They may have a higher budget for expenses like food while traveling than at home. Also, they may have more time for social activities that begin particularly at night. It would be wise for health educators to discuss how to exhibit positive behaviors in all environments.

Recommendations

This study provides insight into the differences in health-related behaviors of admissions recruiters both on and off the road. Further research could be done on this population to examine each health-related behavior specifically. Research and documentation on the day-to-day life of admissions recruiters should be documented for future studies, as well.

Hotel chains may want to use the results of this study to improve their interaction with admissions recruiters, they may consider ways to create an environment more similar to the home environments of the recruiter in an attempt to limit the negative changes of behavior when they are on the road.

Admissions directors who are in a managerial position, may include safety driving classes and health-related interventions to the job requirements of admissions counselors.

This could help increase productivity while on the road. Also, this would help decrease days recruiters are absent from work due to sickness.

Lastly, research may be done with traveling populations, in general, to examine the root causes of the differences between travel behavior and home behavior. Aspects of this research could include social, psychological, emotional, and physical barriers to positive health behavior that may change when on the road.

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APPENDICES

APPENDIX A PARTICIPATION LETTER TO TACRAO LIST-SERV

Dear University Admissions Recruiter,

Every fall semester, admissions recruiters in Texas start looking for their next class of students. The recruiters travel to college fairs at high schools and colleges all throughout the state. Because of the large geographic areas that must be covered by these recruiters, many of them are away from home for a week or more. It is very important to understand the health risks this population faces during the time away from home.

As a student in Health Studies at Texas Woman's University, I am requesting your participation in a research study that compares the health behaviors of admissions recruiters when traveling to when not traveling during the TACRAO recruiting season. If you would like to participate in this study, please click on the following link to fill out the survey. No personal identifying information is asked on the survey itself. Your information will be used for the purposes of this study only and will be kept confidential. However, please keep in mind that there is always a potential loss of confidentiality through all email and downloading transactions. To try to minimize this risk the researcher has purchased encryption software.

The submission of your completed questionnaire constitutes your informed consent to act as a participant in this research.

To participate click on the following link: http://www.surveymonkey.com/s.asp?u=25114704998

Thank you for your participation, Georgia Kousoulis, B.S. Texas Woman's University APPENDIX B STUDY AS SEEN ON SURVEYMONKEY.COM

University Admissions Recruiter Behavioral Risk Fac

1. Demographic page

THE RETURN OF YOUR COMPLETED QUESTIONNAIRE CONSTITUTES YOUR INFORMED CONSENT TO ACT AS A PARTICIPANT IN THIS RESEARCH.

The information you give on this survey is confidential and anonymous. Your information will be used to produce summary reports describing the group of individuals who take this survey.

1. 1. Age						
2. Gender						
Male	Female					
	أنسد					
3. What is	your race?					
African American o Black	American Indian or Alaska Native	Hispanic	/Latino	Asian or Pacific Islander	White	Other or mixed race

*4. What is your marital status?

Single (never Married married)

Live with Partner

Separated or Widowed Divorced

*5. Do you have children?

Yes

No

6. How many weeks have you been on the road away from home during this Fall 2004 TACRAO season?

Less than one week

1 week

2 weeks 3 weeks

4 weeks

5 + weeks

Next >>

University Admissions Recruiter Behavioral Risk Factor Survey 2. Behavioral Survey

Please answer the following 21 questions as relating to your on-the-road and offthe-road behaviors this TACRAO recruiting season from Sept to today. By "onthe road", we mean during the time you are traveling away from home for college/university recruitment purposes. By "off-the-road", we mean the time you are home in the office.

The information you give on this survey is confidential and anonymous. Your information will be used to produce summary reports describing the group of individuals who take this survey.

*7. 1. During the Fall 2004 TACRAO season, how many hours have you driven each day?

	Less than one	1-2	3-4	4-5	6 or more
While "On the road"	J	J	J	J	J
While "Off- the-road"	J			J	

*8. During the Fall 2004 TACRAO season, how often have you driven 30-60 minutes?

	Less than one day per week	1-2 days per week	3-4 days per week	5 days per week	6-7 days per week
While "On- the-)	J	J		J

road" While "Offtheroad" *9. During the Fall 2004 TACRAO seaon, how often do you drive three or more hours? 1-2 days 3-4 days 5 days Less than one 6-7 days per week per week per week day per week per week While "ontheroad" While "offtheroad" *10. During the Fall 2004 TACRAO season, how many times have you driven drowsy? 5-10 More than 10 3-4 1-2 Never times times times times While "onthe-

road"					
While J "off- the- road")			•	
11. During a typ meals do you u					now many
	Less than 1	1-2	3-7	8-12	13+
While "on-the- road"	J			J	J
While "off-the- road"		J		•)
12. During a typ have you eaten milk, eggs, butt foods, etc.)	high fat foo	ds? (hot d	ogs, cheese	e, hamburge	ers, whole
	never	rarely	sometimes	usually	always
While "on-the- road"		J	J		J
While "off-the- road")	J		J	

University Admissions Recruiter Behavioral Risk Factor Survey 3. Behavioral Survey Page 2/4

Please answer the following questions as relating to your onthe-road and off-the-road behaviors this TACRAO recruiting season from Sept to today. By "on-the road", we mean during the time you are traveling away from home for college/university recruitment purposes. By "off-the-road", we mean the time you are home in the office.

The information you give on this survey is confidential and anonymous. Your information will be used to produce summary reports describing the group of individuals who take this survey.

* 13. During a typical week in the Fall 2004 TACRAO, how often would you say you wore your seatbelt while driving in a car?

	always	usually	sometimes	rarely	never
While "on-the- road"		ر	J	j	J
While "off-the- road"	, de la constantina della cons		.		J

*14. During a typical week in the Fall 2004 TACRAO season, how often would you say you wore your seatbelt while riding in a car?

always usually sometimes rarely never

While "on-the-

road" While "off-theroad" *15. During a typical week in the Fall 2004 TACRAO season, have you exercised for at least 30 minutes? 5-6 days a 3-4 days a 7 days a 1-2 days a 0 days a week week week week week While "ontheroad" While "offtheroad" *16. During a typical week in the Fall 2004 TACRAO season,how often have you done stretching exercises? 3-4 days a 5-6 days a 1-2 days a 0 days a 7 days a week week week week week While "ontheroad"

While "off-	J				J	
the-						
road"						
	• • • •			l 2004 TACF jogging, cy		n, how often wimming?
	7 days a week	5-6 da week			1-2 days a week	0 days a week
While "on-	J)		i	J	J
the- road"						
				e:		
While "off-		<i>J</i>			-	
the-						
road"						
			•			
*19 In a	ionoral d	uring a tyr	ical week	c in the Fall	2004 TAC	RAO season,
how of	ten has s	tress inter	fere with	your quality	y of life?	1010 0000011,
	:	Never	Rarely	Sometime	es Usually	y Always
While road"	"on-the-	J.	J	J		J
While road"	"off-the-				na)	
			7.0			

<< Prev Next >>

University Admissions Recruiter Behavioral Risk Factor Survey 4. Behavioral Question 3/4

Please answer the following questions as relating to your on-theroad and off-the-road behaviors this TACRAO recruiting season from Sept to today. By "on-the road", we mean during the time you are traveling away from home for college/university recruitment purposes. By "off-the-road", we mean the time you are home in the office.

The information you give on this survey is confidential and anonymous. Your information will be used to produce summary reports describing the group of individuals who take this survey.

*19. During a typical week in the Fall 2004 TACRAO season, how many hours of sleep have you had most nights

	More than 10 hours	9-10 hours	7-8 hours	6-7 hours	Less than 6 hours
While "on- the- road"		<i>J</i>	,)
While "off- the- road"			J	J	

*20. During a typical week in the Fall 2004 TACRAO season, how many hours of sleep do you feel you needed to have at night?

	More than 10 hours	9-10 hours	7-8 hours	6-7 hours	Less than 6 hours
While "on- the- road")	J	J	J	J
While "off- the- road"		J			J

*21. During a typical week in the Fall 2004 TACRAO season, how would you rate your overall quality of sleep

	Excellent	Good	Satisfactory	Unsatisfactory	Poor
While "on-the- road"	٠ ٠ ٠)	J		J
While "off-the- road"	Stand	name de la constante de la con		J	

*22. During a typical week in the Fall 2004 TACRAO season, how many alcoholic drinks have you consumed (including beer, wine, liquor)?

	ess than 1 Irink	1-7 drinks	8-14 drinks	15 drinks or more
While "on- the- road"	J	J	ž	J.
While "off- the- road"	J	J		٠

*23. During a typical week in the Fall 2004 TACRAO season, how many cigarettes have you smoked?

	I never use tobacco products	1-7 cigarettes (less than half a pack)	8-14 cigarettes (half a pack)	15-20 cigarettes (more than have a pack to a pack)	21+ cigarettes (more than a pack)
While "on- the- road"	:	<i>)</i>	J		
While "off- the-)	

road"

University Admissions Recruiter Behavioral Risk Factor Survey Behavioral Survey 4/4

Please answer the following questions as relating to your on-the-road and off-the-road behaviors this TACRAO recruiting season from Sept to today. By "on-the road", we mean during the time you are traveling away from home for college/university recruitment purposes. By "off-the-road", we mean the time you are home in the office.

The information you give on this survey is confidential and anonymous. Your information will be used to produce summary reports describing the group of individuals who take this survey

*24. During a typical week in the Fall 2004 TACRAO season, how many days have you missed due to illness?

	Less than 1 day	1-2 days	3-4 days	5-7 days	More than 7 days
While "on- the- road"		J		d	
While "off- the-					

road"

*25. During a typical week in the Fall 2004 TACRAO season, how many days have you been ill enough to miss work but did not take time off from your job?

