Chapter - V

SUMMARY, CONCLUSIONS, SUGGESTIONS AND RECOMMENDATIONS
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AND RECOMMENDATIONS

5.1 Prologue:

This chapter presents the conclusions, and what the study has to contribute to the advancement of education as a science.

In this section the summary, conclusion of the present investigation, suggestions and recommendations for further research are given as under.

5.2 Summary:

The aim of any university is "The promotion and maintenance of high degree of physical, mental and social well-being of employees". Having a healthy body is considered to be of great importance for any employee. From the professional point of view of society, too, the remaining health of an employee is considered to be important, because if a person is sick or disease affected, he can pose a risk for the society directly or indirectly. The healthy employee works well and helps production and adds to the comfort of life. The welfare of the 'self' and that of 'society' lies in healthful living and not in sick attitude towards life. Employees physical fitness leads to social health and social health to national health.
Socio-economic status denoted the sub-group to which an individual belongs in the society. Each sub-group has its own typical subculture with emphasis on different values, morals, ideas etc. for instance, educationists all over the world have found low aspiration level for educational achievement in the lower socio-economic strata as they do not get ideal images for educational attainment from adults in their immediate social environment. They lack facilitation to make optimum use of educational opportunities and they have lower expectations of educational outcomes.

An individual’s socio-economic status may influence his opportunity for participation, his desire to excel, his choice of activity, and his success. However as athletic prowess enhances socio-prestige and acceptance, one in a low strata may be motivated to develop his athletic prowess to gain social prestige and acceptance which is denied to him otherwise being belonging to a low socio-economic strata.

Health is man's greatest wealth; he who has health must cherish it with care least he should lose it. To this end he must have adequate knowledge of how to live healthy. Health is not merely absence of disease; it is positive quality of living body which fitness for one's work and happiness are distinguishing marks.

According to W.H.O., "Occupational health should aim at the promotion and maintenance of the highest degree of physical, mental and social well-being of workers in all occupations. The prevention among workers of departments from health caused by their working conditions; the protection of workers in their employment from risk resulting from factors
adverse to health; the placing and maintenance of the workers in an occupational environment adopted to his physiological and psychological equipment, and to summarize, the adoption of work to man and of each man to his job."

It is fact that a sizeable portion of employees in the universities suffers from health problems that are mostly work generated. In Indian Universities employees flooded with over stress trying to attain strength from their cups of coffee and puffs of cigarettes. Many employees report for work on time and work for unlimited hours, that the University stands to earn more, if an employee put in additional work hours is only a myth.

Poor eye sight, spondelytes, depression, irritability. low back pain, asthma, diabetes, high blood pressure, low blood pressure, unhealthy sleep and obesity are only a few of problems. Lack of care can lead to long term ailments, wherein not only the employee concerned, but his entire family has to suffer and as a result of that suffers the functioning of whole university.

Another problem that has a direct implication on the employee's Psyche is lack of feeling of belonging to his university. "There is much more an employee expects from his organisation, beyond a work-salary relationship. A sense of attachment to his/her university is very important". opine employees by and large. Agreeing to this Prof. Hedge, Vice Chancellor, Manipal Academy of Higher Education stated, "Japan has the lowest rate of heart attack in the world. One of the reasons is the absence of difference between the boss and workers. So a sense of belonging helps".
A glance at various organisational website and annual reports reveal that the lack of comprehensive health plan for the employees has resulted in indirect, recurring losses for organisations.

Long ago Plato observed “the body must need be vigorous in order to obey the soul; a good servant ought to be robust. The weaker the body, the more it commands, the stronger it is, the better it obeys... in order to think, we must exercise our limbs, our sense and our organs, which are the instruments of our intelligence. In order to derive all the advantages possible from these instruments, it is necessary that the body, which furnishes them, should be robust and sound.

These are not hollow words or the fiction of an idealist philosopher’s brain; because health and fitness are quo non-human life. Healthy and fit employee is an asset while weak employee, a liability; is a truism: the former commands and latter demands. Realizing that employee’s efficiency and productivity are much dependents exclusively on his/her health and fitness.

Physical fitness among male and female employees as among people in general, exists in varying degrees. It is influenced by age, sex, heredity, personal habits, exercise and eating habits, attitude towards life, anxiety, tension and stress. Particularly anyone can improve his fitness status. Physical activity, good food, proper rest is essential to achieve physical fitness. Physical fitness cannot be stored up. It requires daily attention. To be a total fit person, you must also possess emotional maturity, high ethical standards and ability to get along with others. Shephard, (1982) makes some compelling remark about the benefit of employee fitness. He states that, "the
combined saving from a reduction of appraised age, improvement in life style, decreased use of hospital and physician and physician service, decreased absenteeism and employee turnover, improved productivity, and decreased geriatric care substantially exceed the likely outlay in costs.

Physical fitness in a social and economic context contributes to the goals of society. Society is more than a government of the people; it is where one lives, what one does to make a living, and how one is able to enjoy life. Physical fitness is in its role as recreation, sports and healthy serving spirit and as a personal medium for enjoyment. Fitness and well being is important in preparation for a society that has positive values and is a desirable place for its people. Although society is the setting for one's vocational life, it provides much more than economic security. Davis (1970) found that physical fitness was infused by socio-economic status. Physical fitness can influence and contribute to social learning, which in turn develops the social values that produce social interactions. It is the process of socialization and the way in which people acquire their habits, attitudes and social roles that determine their interrelationships with other in the social structure.

Attitude indicates the mental and physical disposition towards all things around the individual for easy comprehension at this stage. We may consider the attitude as described above. The general trend is that attitude follows the possession of knowledge but there can also be instances when attitude has been formed without any basic knowledge. For example, when one sees a mountain one may feel desirous to climb it without knowing exactly the conditions on the mountain.
Attitude develops in the process of want satisfaction. In coping with various problems in trying to satisfy his wants, the individual develops attitudes. He develops favourable attitude towards objects and people that satisfy his wants. Attitude need not necessarily be enduring or permanent because they depend on perception, knowledge and significant others. As we all know we keep changing our attitude when we grow with age, occupation, power, socio-economic status, etc. Holzbach, Piserchia et al. (2003) evaluated the effect of a health promotion programme on the work related attitude of employees.

Employee's attitude towards physical fitness may have significantly affected by their body image and associated with positive and negative physical education experiences during their youth. With the increases emphasis on fitness and weight control in our society, today many employees are enrolling in physical activity programme as a means to achieve theses ends. Body image is an important concern to every individual of all ages. In these days and age in which society places great importance on a fit and trim physique, an individual should develop healthy attitudes towards his own body. The attitude and feelings of the peoples towards their body affect the personality development. For example, an individual who is unfit may view his/her body as ugly and also lack in confidence and performance. On the other hand, an individual who feels that his/her body is well developed, have confidence that he/she can meet the challenges of many difficult situation and enjoy in his activities.

In an university setting, the relationship between supervisor and employees, employees to his co-employees and co-operation from higher
authorities and officers motivate the employees to develop healthy attitude towards physical fitness in order to maintain and increase their work productivity.

The healthy environment and facilities provided by the management at the workplace also motivate the employees to develop healthy attitude towards physical fitness in order to maintain and increase their health status and work productivity, which is helpful in promoting the economic status of employees as well as of the university.

The subjects chosen for the present research were the employees working in Vidarbha region universities of Maharashtra. There are three non-agricultural Universities lies in Vidarbha region. There are about 1750 employees rendering their services to these universities. Present researcher selected 550 employees as sample for the present study through stratified sampling.

Hence taking into consideration the importance of socio-economic status, health problem and attitude towards physical fitness among university employees willingly or forcefully made present researcher to take this study for research.

For fulfilling this purpose the present researcher conducted the present investigations viz:

1] Acquired "R.L. Bhardwaj's" Socio-economic Scale (Hindi Version) for measuring the employees undertaken for present research.

2] Survey the socio-economic status of subjects.
3] Construction of Questionnaire for investigating the health problems of employees undertaken for present research.


5] Construction of Attitude scale (Opinionnaire) towards Physical Fitness consisting of A and B parts viz. part-A for Bio-data and part-B for opinionnaire.

6] Survey of attitude of subjects towards the physical fitness.

The Objectives Of The Study Were :-

1] To formulate a questionnaire for knowing the health problems of employees.

2] To construct an attitude scale (opinionnaire) for measuring the attitude of employees working in the Vidarbha region Universities of Maharashtra towards Physical fitness.

3] To find out the Socio-economic status of employees working in Vidarbha region Universities of Maharashtra.

4] To find out the health problems of Administrative and Academic employees working in Vidarbha region Universities of Maharashtra.

5] To find out the health problems of male and female employees working in Vidarbha region Universities of Maharashtra.

6] To find out the health problems of Urban and Rural area employees working in Vidarbha region Universities of Maharashtra.

7] To investigate health problems of the employees related to different socio-economic status.

8] To compare the significance of the attitude of Administrative and Academic employees towards physical fitness.
9] To compare the significance of attitude of male and female employees of the universities towards physical fitness.

10] To compare the significance of the attitude of rural and urban area employees towards physical fitness.

11] To find out the attitude of employees related to different Socio-economic status towards physical fitness.

12] To investigate the relationship in between socio-economic status, health problems and attitude towards physical fitness among university employees.

The Present Researcher hypothesised the study as under :-

1] Employees working in Vidarbha region universities of Maharashtra state undertaken for the present research will not differ significantly with respect to their socio-economic status.

2] Administrative and academic employees working in Vidarbha region universities of Maharashtra state undertaken for the present research will not differ significantly with respect to their socio-economic status.

3] The employees belonging to different Social-economic strata working in Vidarbha region universities of Maharashtra state will not differ significantly with respect to their health problems.

4] The attitude of employees working in Vidarbha region Universities of Maharashtra will be unfavourable towards physical fitness.

5] The attitude of employees working in Vidarbha region universities of Maharashtra belonging to different Social-economic strata will not differ significantly with respect to their attitude towards physical fitness.
6] There will be no significant difference in between the attitude of employees belonging to administrative staff and academic staff of Vidarbha region universities undertaken for the present research.

7] Their will be no significant relationship found in between socio-economic status, health problems and attitude of employees working in Vidarbha region universities of Maharashtra state towards physical fitness.

The Scope of the study were delimited in the following respect:

1] The study was delimited to three non-agricultural universities of Vidarbha region in Maharashtra state only, viz. Amravati University, Amravati, Nagpur University, Nagpur, Kavi Kulguru Kalidas Sanskrit University, Ramtek.

2] The study was delimited to the administrative staff (non-teaching viz. Officers, Clerks and Peon) as well as the academic staff (teaching viz. Professors, Readers and Lecturers) working in the different departments of the universities undertaken for the present study.

3] The study was delimited to male and female employees undertaken for the present study.

4] The study was further be delimited to the use of "R.L. Bhardwaj" socio-economic status scale for measuring the socio-economic status of employees undertaken for present research.

5] The study was further be delimited to the use of questionnaire having two parts, A and B, viz. A for Bio-data, B for questionnaire. For investigating the health problems of employees undertaken for the present research.
The study was further be delimited to the use of attitude scale (opinionnaire) having two parts A and B viz. A for Biodata, B for Opinionnaire.

The present study delimited only to the non-communicable health problems related to various body systems i.e. Cardiovascular system, Respiratory system, Nervous system, Musculo-skeletal System, Digestive System, Excretory system, Endocrinal system and special senses.

The study was delimited only to the full time employees working in Vidarbha region universities of Maharashtra.

The following were the factors that could not controlled while collecting the data:

1] The authenticity of obtained data were depend upon the honesty of the subjects undertaken for the present study.

2] No motivational technique was used which may affect the result of the present study.

3] Age limit was not considered for collecting the data from subjects related with the present study.

The researcher designed the study as under:

The present researcher acquired the 'R. L. Bhardwaj Socio-economic Status scale's Hindi Version, that was provided to him by Agra Psychological Cell.

To measure the Health Problem of University employees working in Vidarbha region universities of Maharashtra, he designed
‘Employees Health Problem Questionnaire’ with the help of a panel of Five registered permanent doctor form Punjabrao Desmukh Medical College, Amravati, Supervisor and experts in fields of Physical Education. The questionnaire had the two parts viz. Part-A for biodata and Part-B for Question regarding health problem related to eight systems of the body (Cardiovascular, Respiratory, Nervous, Digestive, Musculo-skeletal, Excretory, Endocrinal, Reproductive, Special Sense system). The front page of the questionnaire consisted instructions to the respondents regarding filling up questionnaire.

The present researcher also constructed the Attitude scale on the basis of ‘Likert’s five point Attitude Scale’ (1932), which had two parts viz Part-A for Biodata and Part-B for Opinionnaire, with the help of Supervisor and experts in the filled of Physical Education, as to measure the Attitude of university employees towards Physical Fitness. The front page of the ‘Attitude Scale’ consisted instructions to the respondents regarding filling up opinionnaire.

The present researcher visited personally to Kavi Kulguru Kalidas Sanskrit University, Ramtek, Rashtra Sant Tukdoji Maharaj University, Nagpur, and Sant Gadge Baba Amravati, University, Amravati, and distribute the tools to 600 employees. While filling up the opinionnaire from employees he explain the meaning of questions and statement to make it convenient for filling of the tools. He collected 580 Socio-economic Status Scales, Employees Health Problem Questionnaires and opinionnaires (Attitude Scale towards Physical Fitness) from employees. The present researcher assures them all that the information passed on by them would be kept secret and used for present research purpose only. Thus he could
ultimately collect 580 tools from employees dully filled as per instructions given to them. While scrutinizing them the 30 incorrect tools (Socio-economic Status Scales, Employees Health Problem Questionnaires and Opinionnaires) are abducted and required 550 number of tools (Socio-economic Status Scales, Employees Health Problem Questionnaires and Opinionnaires) are retained.

As to provide more convinced while filling up the Employees Health Problem Questionnaire and ‘Attitude Scale’, both tools were translated into the regional language Marathi. Where as the ‘Socio-economic Status Scale of Dr. R.L. Bhardaj’s Hindi version was used to collect the data. After arranging all the three tools in a sequence, present Researcher administering them on 550 university employees working in Kavi Kulguru Kalidas University, Ramtek (10 employees out 35), Rashtra Sant Tukdoji Maharaj Nagpur University, Nagpur (340 employees out of 1015), and Sant Gadge Baba Amravati University (200 employees out of 600), which was selected through the Stratified random sampling method as a Sample for the present study.

The respondents were Administrative (Officers, Clerk and Peon), Academic (Professor, Reader and Lecturer), Male and Female belonging to Rural and Urban areas employees working in Vidarbha region universities of Maharashtra.

**Statistical analysis and Interpretations of the results:**

The data collected was statistically analysed by using Percentage, Mean, Median, S.D. Sem, ‘t’ –ratio and Chi-square was specially used to found the relationship and significance difference in between different
socio-economic status strata, Socio-economic Status and Health Problems, Socio-economic Status and Attitude towards Health Problems and Health Problem and Attitude towards Physical Fitness.

The raw scores further were arranged into the tabular form in Chapter – IV. Further Percentage, Average Percentage, Mean, Median. S.D. Sem. ‘t’ –ratio and Chi-square were calculated. The data was tabulated of every category like Administrative, Academic, Male, Female, Urban. Rural. Socio-economic Status viz Upper, Upper Middle, Middle, Upper Lower and Lower class. Using above Statistical techniques according to their nature further statistically treated these tables.

5.3 Findings:

The responses given by the selected subjects of this study against the questions and statements analyzed by using Percentage, Average Percentage, Mean, Median, S.D., ‘t’ –ratio and Chi-square independently. The following were the major findings of the study:

While measuring the Socio-economic Status it was found that 1.45% employees belonged to upper class, 11.09% employees belonged to upper middle class and 87.46% employees belonged to middle class, while 0% employees belonged to upper lower and lower class.

While measuring the significant difference among Socio-economic status of employees working in Vidarbha region Universities of Maharashtra, it was found that there is a significant difference as the calculated Chi-Square 133.24 was much higher than the table value for 2 df at 0.05 level of significance.
While measuring the significant difference among Administrative and Academic employees regarding their Socio-economic status, it was found that there is a significant difference as the calculated Chi-Square 40.77 was much higher than the table value for 2 df at 0.05 level of significance.

There were total twenty nine Health Problems related to Eight body systems (Cardiovascular, Respiratory, Nervous, Digestive, Musculo-skeletal, Excretory, Endocrinal Systems and Special Senses), found in the present research. The system wise findings of health problems of total sample were given below:

The findings of health problems related to Cardiovascular System of total sample is given as below:-

Angina :-

Administrative employees viz. Officers, Clerks and Peons suffered from Angina 0%, 0%, and 3.75% respectively. Where as none of the Academic employees reported Angina.

Male and Female employees reported 0.53% and 0.59% Angina respectively.

Urban and Rural areas employees showed Angina 0.53% and 0.57%.

Only 0.62% Middle class employees suffered from Angina While none of the Upper Class, Upper Middle Class reported the same.

High B.P. :-

Administrative employees viz. Officers, Clerks and Peons suffered 17.89%, 6.42%, and 15% respectively from High B.P. Where as
Academic employees viz Professors, Readers and Lecturers, reported High B.P. 20%, 15.38% and 6.42% respectively.

Male and Female employees reported High B.P. 12.36% and 9.41% respectively.

Urban and Rural areas employees showed High B.P. 11.2% and 12%

Upper Class, Upper Middle Class and Middle Class employees reported High B.P. 37.5%, 14.75%, and 10.60% respectively

Low B.P. :-

Administrative employees viz. Officers, Clerks and Peons suffered 1.05%, 7.14%, and 13.75% respectively from Low B.P. While Academic employees viz Readers and Lecturers reported Low B.P. 16.92% and 20% respectively, while none of the Professors reported the same.

Male and Female employees reported Low B.P. 9.21% and 15.29% respectively.

Urban and Rural areas employees showed Low B.P. 13.6% and 5.71%.

Employees belonging to different Socio-economic Status Strata Viz Upper Class, Upper Middle Class and Middle Class suffered 12.5%, 19.67%, and 9.98% respectively from Low B.P.

Heart Attack :-

Administrative employees viz. Officers and Clerks suffered 1.05%, 2.86%, respectively from Heart Attack. Where as Academic employees viz Readers and Lecturers reported Heart Attack 1.54% and 1.43%
respectively, while none of the Peon (Adm) and Professors (Acd) reported the same.

Male and Female employees reported 1.58% reported 1.18% Heart Attack.

Urban and Rural areas employees showed 1.87% and 0.57% Heart Attack.

Whereas employees belonging to different Socio-economic Status Strata Viz Upper Class, Upper Middle Class and Middle Class reported Heart Attack 12.5%, 4.91%, and 0.83% respectively.

Irregular Heart Beat :-

Administrative employees viz. Officers and Clerks suffered 3.16%, 6.42%, respectively from Irregular Heart Beat, While Academic employees viz Readers and Lecturers reported Irregular Heart Beat 3.08% and 5.71% respectively, while none of the Peon (Adm) and Professors (Acd) reported the same.

Male and Female employees reported Irregular Heart Beat 3.95% and 4.12% respectively.

Urban and Rural areas employees showed 4.26% and 3.43% Irregular Heart Beat respectively.

Upper Class, Upper Middle Class and Middle Class employees suffered from Irregular Heart Beat 25%, 4.91%, and 3.53% respectively.

Chest Pain at Work :-

Administrative employees viz. Officers and Clerks suffered 1.43%, and 5% respectively from chest pain at work. While none of the Peon (Adm) and Academic employees responded the same.
Male and Female employees reported 1.32% and 0.59% chest pain at work.

Urban and Rural areas employees suffered from chest pain at work 0.53% and 2.29% respectively.

Middle Class reported 1.26% chest pain at work, while none of the Upper Class, Upper Middle Class reported the same.

On the basis of average percentage, 4.83% Male, 5.20% Female whereas Urban and Rural area employees are 5.33% and 4.09%, respectively, while 14.58%, 7.38% and 4.47% respondents belonging to Upper, Upper Middle and Middle class, respectively were found suffering from the health problems related to cardio-vascular system.

The findings of health problems related to Respiratory system of total sample is given as below :-

**Asthma** :-

Administrative employees viz. Officers, Clerks and Peons suffered 3.16%, 6.42%, and 5% respectively from Asthma. In case of Academic employees viz Readers and Lecturers, they all reported Asthma 3.08% and 2.14 respectively, while none of the Professor reported the same.

Male and Female employees reported Asthma 5% and 1.18% respectively.

Urban and Rural areas employees suffered from Asthma 4.26% and 2.86% respectively.

Upper Middle Class and Middle Class employees suffered from Asthma 4.92% and 3.74% respectively, while none of the Upper class employee reported the same.
Chest injury or Surgery :-

Administrative employees viz. Clerks and suffered 1.43% from Chest injury or Surgery, while none of the Officers and Peons reported the same. Where as Lecturers, reported Chest injury or Surgery 0.71%, while none of the other Academic employees responded the same.

Only 0.79% Male employees reported Chest Injury or Surgery while none of the female.

0.8% urban area employees reported Chest Injury or Surgery while none of the rural areas employees reported the same.

Upper Class, Upper Middle Class reported Chest injury or Surgery 12.5%, 3.28%, while none of the Middle class employee reported the same.

Chest pain while Breath Deeply :-

Administrative employees viz. Officers and Clerks suffered 6.42% and 7.5% respectively from Chest pain while Breath Deeply. While Academic employees viz Readers and Lecturers, reported Chest pain while Breath Deeply 3.08% and 5.71% respectively, whereas none of the Peon (Adm) and Academic employees responded the same.

Male and Female employees reported 1.84% and 10.59% Chest pain while breath deeply.

Urban and Rural areas employees suffered from Chest pain while breath deeply 5.07% and 3.43 respectively.

Upper Middle Class and Middle Class suffered 3.28% and 4.78% respectively from Chest pain while Breath Deeply. While none of the Upper class employees responded the same.
Asbestosis :-

Only Administrative employees viz Officers and Clerks suffered 1.42% and 5% respectively from Asbestosis, while none of the Peon (Adm) and Academic employees viz. Professors, Readers and Lecturers reported Asbestosis.

Only 3.52% Female employees reported Asbestosis respectively, while male ignored the same health problem.

3.43% Urban Rural areas employees suffered from Asbestosis, none of the Rural areas employee reported the same.

Only Middle Class employees reported Asbestosis 1.26%, whereas none of the Upper Class and Upper Middle Class employees reported the same.

Allergic reaction that interfere with Breathing :-

Administrative employees viz. Officers, Clerks and Peons suffered 12.63%, 12.86%, and 16.25% respectively from Allergic reaction that interfere with Breathing, while Academic employees viz Professors, Readers and Lecturers, reported Allergic reaction that interfere with Breathing 10%, 32.31% and 5.71% respectively.

Male and Female employees reported Allergic reaction that interfere with breathing 12.37% and 16.47% respectively.

Urban and Rural areas employees suffered from Allergic reaction that interferes with breathing 15.47% and 9.71% respectively.

Upper Class, Upper Middle Class and Middle Class employees suffered 12.5%, 16.39%, and 13.31% respectively from Allergic reaction that interfere with Breathing.
After calculation of average percentage, it is observed that 4.00% Males and 6.35% Females, 5.12% Urban and 4.09% Rural area employees whereas 5% Upper, 5.59% Upper Middle and 4.62% Middle class employees were found suffering from various respiratory system health problems.

The findings of health problems related to Nervous System of total sample is given as below :-

**Agoraphobia :-**

Only viz. Clerks (Administrative employees) suffered 7.14%, from Agoraphobia. In case of Academic employees viz Professors and Lecturers, they all reported Agoraphobia 6.67% and 2.86% respectively, while none of the other employee belonging to both category reported Agoraphobia.

Male and Female employees reported Agoraphobia 1.05% and 7.06% respectively.

Urban and Rural areas employees suffered from Agoraphobia 3.47% and 1.72% respectively.

Only 3.33% Middle Class employee suffered from Agoraphobia, while Upper Class, Upper Middle Class employees ignored the same.

**Paralysis :-**

Administrative employees viz. Clerks and Peons suffered 0.71%, and 2.5% respectively from Paralysis. Whereas none of the Officers (Adm) and Academic employees viz. Professors, Readers and Lecturers reported Paralysis.
Male 0.79% reported Paralysis, while none of the female employee reported the same.

Only 0.8% Urban area employees suffered from Paralysis, whereas none of the Rural areas employee reported the same.

Only 0.62% Middle Class reported Paralysis, while none of the Upper Class, Upper Middle Class employee reported the same.

The average percentage of Females 5.53% and Males 0.92%, employees belong to Urban area 2.14% and Rural area 0.86%, whereas 1.98% of the Middle class employees were suffering from health problems related to Nervous system, while none of the Upper and Upper Middle class employees reported the same.

The findings of health problems related to **Digestive System** of total sample is given as below :-

**Indigestion :-**

Administrative employees viz. Officers, Clerks and Peons suffered 24.21%, 7.86%, and 5% respectively from Indigestion. In case of Academic employees viz Professors, Readers and Lecturers reported Indigestion 6.67 %, 4.62% and 12.14%.

Male and Female employees reported Indigestion 5.79% and 22.35% respectively.

Urban and Rural areas employees 9.33% and 14.28%, suffered from Indigestion.

Upper Class, Upper Middle Class and Middle Class suffered 12.5%, 13.11%, and 10.60% respectively from Indigestion
Jaundice:-

Administrative employees viz. Clerks and Peons suffered 10.71% and 6.25% from Jaundice, Whereas Academic employees viz. Readers and Lecturers reported Jaundice 0%, 1.54% and 3.57% respectively. While none of the Officers, Peon (Adm) and Professor (Acd) reported the same.

Male and Female employees reported Jaundice 4.74% and 4.71 respectively.

Urban and Rural areas employees reported Jaundice 5.33% and 3.53% respectively.

Only 5.41% Middle Class suffered from Jaundice, while Upper Class, and Upper Middle Class ignored the same.

Piles:-

Administrative employees viz. Officers, Clerks and Peons suffered 9.47%, 7.86%, and 2.5% respectively from Piles, while Academic employees viz Professors, Readers and Lecturers, reported Pile 13.33%, 6.31% and 6.43% respectively.

Male and Female employees reported Piles 9.21% and 3.53% respectively.

Urban and Rural areas employees reported Piles 7.73% and 6.86% respectively.

Upper Class, Upper Middle Class and Middle Class suffered 12.5%, 3.28%, and 7.90% respectively from Piles.

The average percentage calculated for health problems related to digestive system was found 6.58% in the case of Males whereas 10.20% in
case of Females, similarly, 7.46% in the case of Urban area employees whereas 8.22% in case of Rural area employee. It is also observed that 8.33% Upper, 5.46% Upper Middle and 7.97% Middle class employees were suffering from various health problems related to digestive system on the basis of calculated average percentage.

The findings of health problems related to Musculo-skeletal System of total sample is given as below :-

Back Pain : -

Administrative employees viz. Officers, Clerks and Peons suffered 36.84%, 47.86%, and 33.75% respectively from Back Pain. In case of Academic employees viz Professors, Readers and Lecturers, they all reported Back Pain 33.33%, 20% and 17.86 respectively.

Male and Female employees reported Back Pain 27.37% and 42.94% respectively.

Urban and Rural areas employees reported 31.2% and 34.29% Back Pain.

Upper Class, Upper Middle Class and Middle Class suffered 25%, 11.48%, and 34.92% respectively from Back Pain.

Pain in Joints : -

Administrative employees viz. Officers, Clerks and Peons suffered 27.37%, 45.71%, and 21.25% respectively from Pain in Joint. Whereas Academic employees viz Professors, Readers and Lecturers, reported Pain in Joints 26.67%, 6.16% and 12.14% respectively.

Male and Female employees reported 20% and 35.29% Pain in Joints.
Urban and Rural areas employees reported 24% and 26.29% Pain in Joints.

Upper Class, Upper Middle Class and Middle Class reported Pain in Joint 0%, 11.48%, and 26.82% respectively.

**Spondelytes:**

Administrative employees viz. Officers, Clerks and Peons suffered 10.53%, 17.86%, and 2.5% respectively from Spondelytes, while Academic employees viz Professors, Readers and Lecturers, reported Spondelytes 6.67%, 3.08% and 4.29% respectively.

Male and Female employees 9.74% and 5.88% respectively, reported Spondelytes.

Urban and Rural areas employees 8.27% and 4.27% respectively reported Spondelytes.

Upper Middle Class and Middle Class suffered 4.92% and 9.15% respectively from Spondelytes, while none of the Upper class employee reported the same.

**Muscle Weakness:**

Administrative employees viz. Officers, Clerks and Peons suffered 26.32%, 25%, and 20% respectively from Muscle Weakness. While Academic employees viz Professors, Readers and Lecturers, reported Muscle Weakness 16.67%, 9.29% and 6.43% respectively.

Male and Female employees reported Muscle Weakness 13.95% and 35.29% respectively.

Urban and Rural areas employees 18.93% and 18.29% respectively reported Muscle Weakness.
Upper Class, Upper Middle Class and Middle Class reported Muscle Weakness 37.5%, 14.75%, and 18.91% respectively.

On the basis of average percentage, it is clear that, 17.77% Males and 29.85% Females, 20.6% Urban area and 20.78% Rural area employees were suffering from the various musculo-skeletal system health problems. It is also observed that, the average percentage calculated for Upper, Upper Middle and Middle class employees were 15.63%, 10.66% and 22.45% respectively.

The findings of health problems related to Excretory System of total sample is given as below :-

**Kidney stone :-**

Administrative employees viz. Officers, Clerks and Peons suffered 15.79%, 13.57%, and 5% respectively from Kidney stone. In case of Academic employees viz Professors, Readers and Lecturers, they all reported Kidney stone 10%, 9.23% and 6.43% respectively.

Male and Female employees reported Kidney Stone 10.26% and 10% respectively.

Urban and Rural areas employees 10.93% and 8.57% suffered from Kidney Stone.

Upper Middle Class and Middle Class suffered 3.80% and 0.67% respectively from Kidney stone, while none of the Upper class employee reported the same.

**Poly Urea :-**

Only 4.29% Clerks (Adm), 3.08% Readers and 0.71% Lecturers (Acad) employees, reported Poly Urea, while none of the other employees
belonging to both category i.e. Administrative and Academic employees viz. Officers, Peon and Professors reported Poly Urea.

Male and Female employees reported Poly Urea 2.11% and 0.59% respectively.

1.87% Urban and 1.14% Rural area employees reported Poly Urea.

Only 1.87% Middle Class employees reported Poly Urea, while none of Upper Class and Upper Middle Class employee reported the same.

While calculating the average percentage of health problems related to excretory system, it was found that 6.19% Males and 5.30% Females, 6.40% Urban area and 4.85% Rural area employees similarly, 6.56% Upper Middle and 5.93% Middle class employees were sufferers, while the responses given by Upper class employees were totally contradict to them.

The findings of health problems related to Endocrinal System of total sample is given as below :-

**Diabetes :-**

Administrative employees viz. Officers, Clerks and Peons suffered 20%, 22.86%, and 8.75% respectively from Diabetes. In case of Academic employees viz Professors, Readers and Lecturers, they all reported Diabetes 16.67%, 13.85% and 13.57% respectively.

Male and Female employees reported Diabetes 14.74% and 20.59 respectively.

Urban and Rural areas employees suffered from Diabetes 19.2% and 8.8% respectively.
Upper Class, Upper Middle Class suffered 12.5%, 19.67%, and 16.21% respectively from Diabetes.

**Obesity:**

Administrative employees viz. Officers, Clerks and Peons suffered 10.53%, 7.85%, and 2.5% respectively from Obesity. Whereas Academic employees viz Professors, Readers and Lecturers, reported Obesity 23.33%, 18.46% and 10.71% respectively.

Male and Female employees reported Obesity 8.94% and 13.53% respectively.

Urban and Rural areas employees suffered from Obesity 12.53% and 5.71% respectively.

Upper Class, Upper Middle Class suffered 25%, 18.03%, and 9.15% respectively from Obesity.

**Goiter:**

Only a Peon (Administrative employees) reported Goiter, while none of the other employee belonging to both categories i.e. Administrative and Academic reported the same.

0.26% Male employees reported Goiter, while none of the Female employees reported the same.

Only 0.57% Rural areas employees suffered from Goiter, while none of the Urban areas employees reported to the same.

0.20% Middle Class employees suffered from Goiter, while none of the Upper Class and Upper Middle Class suffered from Goiter.

It is also observed that 11.37% Females and 7.98% Males, 10.58% Urban and 5.03% Rural area employees were the sufferers while
12.5% Upper, 12.57% Upper Middle and only 8.52% Middle class employees reported problems related to endocrinal system on the basis of calculated average percentage.

The findings of health problems related to Special Senses of total sample is given as below :-

**Myopia :-**

Administrative employees viz. Officers, Clerks and Peons suffered 75.98%, 57.14%, and 27.5% respectively from Myopia. In case of Academic employees viz Professors, Readers and Lecturers, they all reported Myopia 66.67%, 67.69% and 62.69% respectively.

Male and Female employees reported Myopia 60.53% and 55.88% respectively

Urban and Rural areas employees reported Myopia 58.67% and 60% respectively.

Upper Class, Upper Middle Class suffered 62.5%, 49.18%, and 60.29% respectively from Myopia.

**Hyper-metropia :-**

Administrative employees viz. Officers, Clerks and Peons suffered 10.53%, 13.57%, and 15% respectively from Hyper-metropia. Whereas Academic employees viz Professors, Readers and Lecturers, reported Hyper -metropia 6.67%, 6.15% and 17.86% respectively.

Male and Female employees reported Hyper-metropia 13.68% and 11.76% respectively.

Urban and Rural areas employees reported Hyper-metropia 11.73% and 16% respectively.
Upper Middle Class and Middle Class reported Hyper-metropia 8.20%, and 13.93% respectively, while none of the Upper class employee suffered from Hyper-metropia.

**Cataract** :-

Academic employees viz. Professors and Readers reported Cataract 3.33% 4.62% respectively, while none of the administrative and Lecturers (Academic) employees reported Cataract.

Only 1.05% Male employees reported Cataract, while none of the Female employees reported Cataract.

Urban and Rural areas employees 0.8% and 0.57% respectively reported Cataract.

3.28% Upper Middle Class and 0.20 Middle class employees reported Cataract, while none of the other Upper class employee reported Cataract.

**Night Blindness** :-

Only 1.43%, Clerks (Administrative) employees reported Night Blindness, while none of the other employee belonging to Administrative and Academic category reported Night Blindness.

0.53% Male and Urban employees reported Night Blindness, while none of the Female and rural employee reported the same.

Only 0.42% Middle Class employee reported Night Blindness, while none of the Upper Class and Upper middle class employee reported Night Blindness.

It is quiet clear that, 18.95% Males and 16.91% Females, 17.93% Urban and 18.86% Rural area employees whereas 15.63%, 15.16%
and 18.71% employees belonging to Upper, Upper Middle and Middle class. respectively were suffering from health problems related to special senses system on the basis of calculated average percentage.

**Relationship in between Socio-economic Status and health problems:**

While Finding out the relationship in between Socio-economic and Health Problems it was found that the employees belonged to different socio-economic strata showed significant relationship with respect to their health problems, as the calculated Chi-Square value 306.61, is much higher than the table value for 58 degree of freedom at 0.05 level of significance is 76.67.

**Attitude towards Physical Fitness among University employees:**

While measuring the attitude of University employees towards Physical Fitness it was found that the employees working in Vidarbha region universities of Maharashtra had a favourable attitude towards physical fitness. Respondents above mean were 61.64 and below mean 38.36.

Academic employees were better with respect to their attitude towards physical fitness than Administrative employees as mean value of Academic employees 231.57 and Administrative employees 230.5 respectively.

Male employees had the more favourable attitude towards physical fitness than female employees, as mean value of Male is 234.81 and Female is 222.85 respectively.

Rural area employees had more favourable attitude towards physical fitness than Urban area employees as mean value of Rural area 231.73 and Urban area 229.81 respectively.
Upper class had the more favourable attitude towards physical fitness, than Upper Middle class while Middle class employees, as calculated mean value of Upper class employees 262, Upper Middle class employee 242.04 and Middle 229.22 respectively.

It was also found that Administrative and Academic employees working in Vidarbha region Universities Maharashtra, differed significantly in respect to their attitude towards Physical Fitness, as calculated ‘t’-value 2.38 greater than the table value at 0.05 level of significance 1.96.

Male and Female employees working in Vidarbha region Universities Maharashtra, differed significantly in respect to their attitude towards Physical Fitness, as calculated ‘t’-value 24.32, is much higher than the table value at 0.05 level of significance 1.96.

Urban and Rural employees working in Vidarbha region Universities Maharashtra, differed significantly in respect to their attitude towards physical fitness, as calculated ‘t’-value 3.96, is higher than the table value at 0.05 level of significance 1.96.

Relationship in between Socio-economic status and Attitude towards Physical Fitness among University employees:

It was found that there is a significant relationship exist in between Socio-economic Status and attitude towards Physical Fitness among University employees, as calculated Chi-Square value 8.12 is much higher than the table value for 2 degree of freedom at 0.05 level of significance is 5.99.
Relationship in between Socio-economic status, Health problems and attitude towards physical fitness among University employees:

It was found that the employees belonging to upper class suffering from 44.83% health problems and showed highly favourable (87.5% employees scored above mean value) attitude towards physical fitness. where as employees belonging to Upper Middle class reported 68.97% health problems, and showed favourable (75.41% employees scored above the mean score) attitude towards physical fitness. In case of employees belonging to Upper Middle class they reported 96.55% Health Problems and also showed favourable (59.45% employees scored above the mean score) attitude towards physical fitness respectively.

While the same relationship tested through Additive properties of Chi-square it was also found that calculated Chi-square value 89.02 much higher than the tabulated value at 0.05 level of significance i.e. 7.82 for 3 degree of freedom, which indicates that there is a significant relationship in between Socio-economic status, Health Problems and Employees attitude towards physical fitness.

5.4 Conclusions:

The findings of the study lead to following conclusions:

1) Findings lead to the conclusion that majority of the employees working in Vidarbha region universities of Maharashtra belonged to middle class. While none of the employees belongs to upper lower and lower class i.e. below poverty line.
2) Employees working in Vidarbha region Universities of Maharashtra differ significantly in respect to their socio-economic status.

3) Administrative and Academic employees differ significantly in respect to their socio-economic status, working in Vidarbha region Universities of Maharashtra.

4) Findings of the Health problems of total samples related to **Cardiovascular System** lead to the following conclusion :

4.1 Angina :

4.1.1. Majority of peons (Adm.) reported Angina, while none of the Academic employees reported the same.

4.1.2. There was no difference in the responses given by male-female and rural-urban area employees regarding Angina.

4.1.3. Majority of the Middle class reported Angina, while none of the Upper and Upper Middle class employees reported Angina.

4.2 High B.P :

4.2.1. Majority of Officers (Adm.) and Professors (Acadm.) reported High B.P, more than other employees belonging to administrative and academic category.

4.2.2 Majority of Male employees reported High B.P. in comparison to female employees.

4.2.3. There was no difference in the responses given by urban area and rural area employees regarding High B.P.

4.2.4. Majority of upper class employees reported High B.P. than upper middle and middle class respectively.
4.3 *Low B.P.*:

4.3.1. Majority of Peon (Adm.) and Lectures (Acadm.) reported Low B.P., more than other employees belonging to administrative and academic category.

4.3.2. Female employees were suffered more from the Low B.P. in comparison to male employees.

4.3.3. Urban areas employees were suffered more from the Low B.P. than Rural area employees.

4.3.4 Majority of Upper Middle class employees reported Low B.P. in comparison to upper and middle class employees.

4.4 *Heart Attack*:

4.4.1. Majority of Clerks (Adm.) and Readers (Acadm.) reported Heart Attack, more than other employees belonging to administrative and academic category.

4.4.2. There is no difference in the responses given by male-female and urban-rural areas employees regarding Heart Attack.

4.4.3. Sufferers mostly belonged to Upper class in comparison to upper middle and middle class employees regarding Heart Attack.

4.5 *Irregular Heart Beat*:

4.5.1. Majority of Clerks (adm.) and Lecturers (Acadm.) reported Irregular Heart Beat more than other employees belonging to Administrative and Academic category.

4.5.2. There was no difference in the responses given by Male and Female employees.
4.5.3. Majority of Urban areas employees were the main sufferer of Irregular Heart Beat in comparison to Rural areas employees.

4.5.4. Majority of Upper class employees reported Irregular Heart Beat in comparison to Upper Middle and Middle class employees.

4.6 Chest pain at work:

4.6.1. Majority of Peons (Adm.) reported Chest pain at work, while none of the Academic employees reported the same.

4.6.2. Male employees suffered mainly from Chest pain at work while Female employees reported less Chest Pain at work.

4.6.3. Sufferers from Chest Pain at work mostly belonged to rural area, while a least percentage of the same was found in urban area employees.

4.6.4. Only Middle class employees complained about Chest Pain at Work, while none of the Upper and Upper Middle class employee reported any Chest Pain at Work.

Findings also lead to conclusion that majority of female employees belonging to urban areas and Upper class suffered from various health problems related to cardio-vascular system calculated on the basis of average percentage.

5) Findings of the Health problems of total sample related to Respiratory system lead to the following conclusion :-

5.1 Asthma:

5.1.1. Majority of Clerks (Adm.) and Readers (Acd.) reported Asthma, than other employees belonging to Administrative and Academic category.
5.1.2. Majority of the Male employees reported Asthma, while a least percentages of female employees reported the same.

5.1.3. Urban area employees suffered mostly from Asthma than Rural area employees.

5.1.4. Majority of the Upper Middle and Middle class employees suffered form Asthma respectively, while none of the upper class employees reported the same.

5.2 Chest injury or Surgery:

5.2.1 Majority of Readers (Adm.) and Peons (Acadm.) reported Chest injury or Surgery, while none of the other employees belonging to Administrative and Academic category reported the same.

5.2.2 Only Male employees reported Chest injury or Surgery, while none of the female employees reported the same.

5.2.3 Only Urban area employees reported Chest injury or Surgery, while none of the rural area employees reported the same.

5.2.4 Majority of Upper Class employees reported Chest injury or Surgery in comparison to Upper Middle Class employees, while none of the Middle class employees reported the same.

5.3 Chest pain while Breath Deeply:

5.3.1 Majority of Peons (Adm.) and Lecturers (Acadm.) reported Chest pain while Breath Deeply more than other employees belonging to Administrative and Academic category.

5.3.2 Majority of the Female complained Chest pain while Breath Deeply in comparison to Male employees.
5.3.3 Urban area employees were the main sufferer of Chest pain while Breath Deeply than Rural area employees.

5.3.4 Majority of Middle Class employees reported Chest pain while Breath Deeply in comparison to Upper Middle class, while none of the upper class employees reported the same.

5.4 Asbestosis:

5.4.1 Majority of peons (Adm.) reported Asbestosis than Clerks, while none of other employees belonging to Administrative and Academic employees reported the same.

5.4.2 Only Female employees belonging to rural areas were the main sufferer of Asbestosis in comparison to male employees belonging to urban areas.

5.4.3 Majority of middle class employees reported Asbestosis, while none of the Upper and Upper Middle class employees reported the same.

5.5 Allergic reaction that interfere with breathing:

5.5.1 Majority of peons (Adm.) and Readers (Ac.d.) employees complained Allergic reaction that interfere with Breathing than other employees belonging to administrative and academic category.

5.5.2 Majority of Female employees reported more Allergic reaction that interfere with Breathing in comparison, Male employees reported least percentages of the same.

5.5.3 Employees belonging to Urban areas suffered mainly from Allergic reaction that interfere with Breathing in comparison to Rural area employees.
5.5.4 Upper Middle class employees were the most sufferers of Allergic reaction that interferes with breathing in comparison to Upper class and Middle class respectively.

From the average percentage, it is also concluded that female employees belonging to urban areas and Upper middle class were the most sufferers to the health problems related to Respiratory system.

6) Findings of the Health problems of total samples related to Nervous system lead to the following conclusion :-

6.1 Agoraphobia :

6.1.1 Majority of Clerks (Adm.) and Professors (Acdm.) reported Agoraphobia than other employees belonging to administrative and academic category.

6.1.2 Female employees suffered more from Agoraphobia in comparison to Male employees.

6.1.3 Employees belonging to Urban area suffered mostly from Agoraphobia than Rural area employees.

6.1.4 Only Middle class employees reported Agoraphobia, while none of the Upper and Upper Middle class employees reported the same.

6.2 Paralysis :

6.2.1 Majority of Peons (Adm.) reported Paralysis, while none of the other employees belonging to administrative and academic category reported the same.

6.2.2 Only male employees suffered from Paralysis, while none of the female employees reported the same.
6.2.3 Majority of Rural area employees suffered mostly from Paralysis, while none of the Urban area employees reported the same.

6.2.4 Only Middle class employees reported Paralysis, while none of the Upper and Upper Middle class employees reported the same

It is also concluded on the basis of average percentages that female employees belonging to urban areas and middle class were the most sufferers to the health problem related to Nervous system.

7) Findings of the Health problems of total samples related to Digestive system lead to the following conclusion :-

7.1 Indigestion:

7.1.1 Majority of the Officers (Adm.) and Lecturers (Ac.d.) suffered from Indigestion in comparison to other employees belonging to administrative and academic category.

7.1.2 Female employees suffered mainly from Indigestion in comparison to Male employees.

7.1.3 Majority of Rural area employees reported Indigestion than Urban area employees.

7.1.4 Upper middle class employees were the most sufferer from the Indigestion in comparison to Upper middle class and upper class employees.

7.2 Piles:

7.2.1 Majority of the Officers (Adm.) and Professors (Acdm.) suffered from Piles than other employees belonging to administrative and academic category.
7.2.2 Majority of male employees suffered from Piles than Female employees.

7.2.3 Urban area employees reported more Piles problem than Rural area employees.

7.2.4 Upper class employees were the most sufferer from Piles than upper middle class and middle class employees respectively.

7.3 Jaundice :

7.3.1 Majority of the Clerks (Adm) and Lecturers (Acdm.) suffered from Jaundice than other employees belonging to administrative and academic category.

7.3.2 Male and female employees were found similar in Jaundice.

7.3.3 Majority of Urban area employees reported higher percentages of Jaundice in comparison to Rural area employees.

7.3.4 Only Middle class employees reported Jaundice, while none of upper class and upper middle class reported Jaundice.

Findings also made to conclude that majority of female employees belonging to rural areas and upper classes were suffered from health problem related to Digestive system as calculated on the basis of average percentage.

8) Findings of the Health problems of total samples related to Musculo-skeletal System lead to the following conclusion:

8.1 Back Pain :

8.1.1 Majority of the Clerks (Adm) and Professors (Acdm.) suffered from Back Pain in comparison to other employees belonging to administrative and academic category.
8.1.2 Majority of Female employees were suffered from Back Pain than male employees.

8.1.3 Majority of Rural area employees reported higher percentages of Back Pain in comparison to urban area employees.

8.1.4 Middle class employees were most of the sufferer from Back Pain in comparison to upper and upper middle class.

8.2 *Pain in Joint* :

8.2.1 Majority of the Clerks (Adm) and Professors (Acdm.) reported Pain in Joint than other employees belonging to administrative and academic category.

8.2.2 Majority of female employees complained about Pain in Joint, while a less majority of male employees reported the same.

8.2.3 Majority of rural areas employees reported Pain in Joint than Urban area employees.

8.2.4 Majority of middle class employees reported Back Pain than upper middle class, while none of the upper class employees reported the same.

8.3 *Spondelytes* :

8.3.1 Majority of the Clerks (Adm) and Professors (Acdm.) were suffered from Spondelytes than other employees belonging to administrative and academic category.

8.3.2 Male employees reported higher percentages of spondelytes in comparison to Female employees.

8.3.3 Majority of urban area employees reported spondelytes in comparison to Rural areas employees.
8.3.4 Middle class employees were the main sufferer of spondelytes in comparison to upper middle class, while none of the upper class employees reported the same.

8.4 Muscle Weakness:

8.4.1. Majority of the Officers (Adm.) and Professors (Acd.) were suffered from Muscle Weakness in comparison to other employees belonging to administrative and academic category.

8.4.2. Majority of female employees reported Muscle weakness, while the male employees were found less in Muscle Weakness.

8.4.3. There was no difference in the responses given by urban and rural areas employees regarding Muscle Weakness.

8.4.4. Upper class employees reported a high percentage of Muscle Weakness than middle class and upper middle class employees.

Findings lead to the conclusion that majority of female employees belonging to rural areas and middle class were the main sufferer of health problems related to Musculo-skeletal system, calculated on the basis of average percentage.

9) Findings of the Health problems of total sample related to Excretory system lead to the following conclusions:-

9.1 Kidney Stone:

9.1.1 Majority of the Officers (Adm) and Professors (Acdm.) complained Kidney Stone than other employees belonging to administrative and academic category.

9.1.2 Male and female employees were found similar regarding Kidney stone.
9.1.3 Most of the Sufferers from kidney stone mainly belonged to urban area, whereas small percentages of responses regarding kidney stone were reported by rural area employees.

9.1.4 Upper middle class employees reported kidney stone more than middle class employees, while none of the upper class employees reported the same.

9.2 *Poly Urea* :

9.2.1 Majority of the Clerks (Adm) and Readers (Ac.d.) reported Poly Urea, while none of the other employees belonging to administrative and academic category reported the same.

9.2.2 Majority of the male employees reported Poly urea in comparison to female employees.

9.2.3 Urban and rural area employees were found similar in regards to Poly Urea.

9.2.4 Only middle class employees reported Poly Urea, while None of the employees belonging to upper and upper middle class reported Poly urea.

On the basis of average percentage it is concluded that majority of male employees belonging to urban areas and upper middle class were suffered from health problems related to Excretory system.

10) Findings of the Health problems of total sample related to *Endocrinal system* lead to the following conclusion :

10.1 *Diabetes* :

10.1.1 Majority of the Clerks (Adm) and Professors (Ac.d.) suffered from Diabetes than other employees belonging to administrative and academic category.
10.1.2 Majority of female employees were the main sufferer of Diabetes in comparison to Male employees.

10.1.3 Urban area employees were mostly grieved by Diabetes in comparison to Rural area employees.

10.1.4 Upper middle class employees were the main sufferer of Diabetes in comparison to middle class and upper class employees.

10.2 Obesity:

10.2.1 Majority of the Officers (Adm) and Professors (Acad.) suffered from Obesity than other employees belonging to administrative and academic category.

10.2.2 Majority of the female employees were the main sufferer of Obesity than Male employees.

10.2.3 Majority of urban area employees reported a high percentage of Obesity than rural area employees.

10.2.4 Only Upper class reported higher percentages of Obesity, while Upper middle class and middle class reported less percentage of Obesity.

10.3 Goiter:

10.3.1 Only one male peon from (Adm.) employees belonged to rural areas to and middle class reported Goiter, while none of the other employees in the sample reported the same.

It is also concluded that female employees belonging to urban areas and upper middle class suffered from various health problems related to Endocrinal system as calculated on the basis of average percentage.
11) Findings of the Health problems of total samples related to **Special Senses** leads to the following conclusion:

### 11.1 Myopia:

11.1.1 Majority of the Officers (Adm) and Readers (Acdm.) reported Myopia than other employees belonging to administrative category, while their was no difference found responses given by academic employees to the same.

11.1.2 Majority of the male employees reported high percentages of Myopia in comparison to female employees.

11.1.3 Rural area employees were the main sufferers of Myopia than Urban employees.

13.1.4 Upper and Middle class employees were found similar regarding Myopia, while upper middle class employees were the less sufferers of the same.

### 11.2 Hyper-Metropia:

11.2.1 Majority of the Peons (Adm) and Lecturers (Acdm.) reported Hyper-metropia than other employees belonging to administrative and Academic category.

11.2.2 Male employees suffered mainly from the Hyper-metropia, while female employees were the less sufferer from the same.

11.2.3 Rural area employees reported a higher percentages of Hyper-metropia in comparison to Urban area employees.

11.2.4 Hyper-metropia was mostly found in Middle class and Upper middle class employees, while none of the upper class employee reported the same.
11.3 Cataract:

11.3.1 Majority of the Readers (Acdm.) reported Cataract more than Professors, while none of the Lecturers and Administrative employees reported Cataract.

11.3.2 Only male employees reported Cataract, while None of the female employees responded the same.

11.3.3 There was no difference in responses given by urban and rural areas employees regarding Cataract.

11.3.4 Most of the sufferers from Cataract were found in the upper middle class, while none of the Upper class and Middle class employees reported the same.

11.4 Night blindness:

11.4.1 Majority of the male clerks (Adm.) belonging to urban areas and middle class status reported Night blindness, while none of the other employee belonging to the present sample reported Night blindness.

From the findings based on average percentage lead to conclude that female employees belonging to rural areas and middle class were the most sufferers regarding health problems related to Special senses.

12) There was a significant relationship found in between Socio-economic Status and Health Problems of employees working in Vidarbha region Universities of Maharashtra.

13) Employees working in Vidarbha region universities of Maharashtra had favourable attitude towards Physical Fitness.
14) Employees who belonged to Upper class had the more favourable attitude towards physical fitness, while Upper Middle class employees were better in their attitude towards Physical Fitness than Middle Class employees.

15) Administrative and Academic employees working in Vidarbha region Universities of Maharashtra, differed significantly in respect to their attitude towards Physical Fitness.

16) Male and Female employees working in Vidarbha region Universities Maharashtra, differed significantly in respect to their attitude towards Physical Fitness.

17) Urban and Rural area employees working in Vidarbha region Universities Maharashtra, differed significantly in respect to their attitude towards Physical Fitness.

18) There is a significant relationship found in between socio-economic status and attitude of university employees towards physical fitness.

19) Findings lead to conclude that employees Socio-economic Status, Health Problems and Attitude towards Physical fitness were significantly related with each other.

On the basis of the above findings and conclusions it can be briefly concluded that most of the employees working in Vidarbha region Universities belonged to Middle class and mostly suffered from musculo-skeletal, special senses and nervous systems health problems and had comparatively less favourable attitude towards physical fitness. While upper class employees had highly favourable attitude towards physical fitness suffered from less health problems. Hence significant relationship in between socio-economic status, health problems and attitude towards physical fitness was clearly noticed.
5.5 Suggestions:

1) University management should create awareness among employees to participate in social activities such as blood donation, social meetings, donation to handicapped and orphan organisation etc., which is helpful to employees to develop their socio-economic status.

2) University management should frame the special Health Promotion Policy as to Promote the Health Status of the employees.

3) University management should maintain record-keeping and reporting system to measure and evaluate the "Fitness and Health Problem" of employees and dependents as well as to comply with legal, insurance and organisation requirements.

4) University should carry out the health-fitness programme, health services and fitness expert's guidance to the employees in the campus.

5) An annual Health and Physical Fitness Checkup Camp for the University employees should be organised in the university campus by P.G.T.D. of Physical Education.

6) Employees should follow the family Doctor regarding minor and serious health problems.

7) Heart patient should seek Doctors opinion while taking part in physical activities.

8) Female employees should indulge in physical activities such as jogging, running and exercises, which are helpful to them in creating favourable attitude towards Physical fitness and health.
9) Develop a sense of belongingness in between senior and junior, officers and non-officers, which leads to mass participation in physical activities get to gather and absence of office stress.

10) University management should provide guidance, motivation, encouragement and a means for employees and dependents to achieve and maintain their optimum level of fitness and wellness.

11) University should provide protection to the employees against health hazards such as Poor lightning, uncomfortable furniture, excessive noise, air and water pollution, heat etc. in their work environment and personal lines.

12) University management should facilitate job placement and insure the suitability of individual according to their physical capacities, mental abilities, and emotional make up to work they can perform with an acceptable degree of efficiency and without endangering their health and safety or that of their fellow workers.

13) University management should create awareness among the employees about the virtues of physical fitness and the need to release stress and tension of the present day fast-paced life through sports and cultural activities.

14) University management should properly maintain the sports facilities viz. football, volleyball, play ground etc. to the satisfaction of the university employees who are the end-user of these facilities.

15) University should organise inter-department sports tournaments in aspect of all disciplines of sports and culture.
16) University management should carry out physical fitness activities in such a way as to arouse interest among employees to ensure their mass participation and towards this end involve the children of the employees also in the activity of the board.

17) A redressal committee regarding employee's attitude towards physical fitness should be form at the University level.

18) University should organise the special health and physical fitness awareness programme for the female employees.

19) A separate Health and Physical Fitness department should be created at university level in which the services of a Doctor and Fitness experts should be provided to the employees. The periodic medical checkup report should be submitted to this Department.

20) University should adopt a Work place Physical fitness programme for the employees, according to foreign universities.

5.6 Implications:

Present research would be valuable in realising the target of W.HO. that every individual should be healthy in 2000 A.D., in respect of University employees through this research.

The findings of the study may have many implications in the field of Social, Health, Physical fitness and Physical Education. It would be a valuable means of exploring the Socio-economic status, Health problems and Attitude towards Physical Fitness of university employees which aware the employees as well as university managements about the present social and health - Physical fitness conditions of university employees.
The present research would provide detail information of Socio-economic status, Health problems and attitude of employees towards Physical Fitness to the Govt. of Maharashtra and all the employees of the concerned Universities.

It would be a link in between the university employees and the concerned management in making early arrangement of protecting the employees from fatal diseases affecting fitness.

It would be helpful in creating remedial measures to the university management for protecting the employees from different Health problems.

It would be a milestone for the employees of other universities in maintaining their Health and Fitness and to be aware of the Health problems from which the employees of universities investigated under this investigation suffered.

The present research would be valuable for creating the positive attitude towards leisure time physical activities, sports and social activities among employees.

Present research would be valuable to the Govt. in framing the new policy regarding Health, Physical Fitness and Social status of university employees.

Present research would also be valuable to university management in implementing the Health and Physical Fitness programme at the work place to boost the moral of employees.

Ultimately this research would be valuable for employees in order to increase their working output.
5.7 **Recommendations:**

On the basis of the findings and conclusions, some recommendations are made for further studies as follows:

1) Present research was a descriptive survey, an experimental research might also be conducted on socio-economic status, health Problems and physical fitness status of employees working in Vidarbha region universities of Maharashtra.

2) Same type of research may also be conducted on employees working in various colleges affiliated to the Vidarbha region universities of Maharashtra.

3) Same type of research may also be conducted on employees of other department viz., Health, Police, Agriculture, Banking departments and employees working in Factories and Companies etc.

4) Similar study may also be conducted on the larger sample of employees working in Vidarbha region universities of Maharashtra as to provide the cross validation of the reported results with larger sample from similar population elsewhere.

5) A separate study of health problems of university employees may also be conducted.

6) A separate study of Socio-economic Status of university employees may also be conducted.

7) A separate study on university employee's attitude towards physical fitness may also be conducted.
8) A study of attitude of university employees towards physical activities may be conducted.

9) Same type of research may also be conducted on employees working in various universities of Southern region of India.

10) Same type of research may also be conducted on employees working in various Central Universities, Deemed universities, Open universities and agricultural universities.