Health Behavior of Female University Students regarding Toxoplasmosis

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ABSTRACT

Background: Toxoplasmosis is a public health concern affecting humans and animals, often asymptomatic thanks to a healthy immune system that controls the infection. **The study aimed** to assess health behavior of female university students about Toxoplasmosis. **Subjects and Method:** A descriptive study design was utilized in the current study. Port Said University campus of girls that is located in Port Fouad City was the setting of the current study. A purposive sample of 488 female university students was recruited for this study. The tool used to collect data was a self-administered questionnaire, which consisted of: (1) Socio-demographic data of the studied sample and (2) Health behavior of female university students regarding toxoplasmosis that included 9 questions for all students about eating and cooking safety practices and hygiene and another 11 questions for only pet owners focusing on pet's hygiene, self-hygiene while dealing with pets, vaccination and food of pets. It was described as suitable, fair and poor. **Results*:*** According to the current study, 86.1% of the studied group had a satisfactory and suitable level of healthy behaviors, while 4.1% had a poor level. Only 38.3% of students own pets, while 74.9% of the studied group who own pets had a satisfactory and suitable level of healthy behaviors. Additionally, there was a statistically significant relation between age, faculty, academic level and ownership of pets and health behavior of female university students regarding toxoplasmosis. **Conclusion:** A suitable health behavior regarding Toxoplasmosis was found among the studied group. **Recommendations:** Emphasizing on preventive measures through workshops for students about healthy food practices and good hygiene to prevent any infectious diseases.

Keywords: Health behavior, Toxoplasmosis, University students.

INTRODUCTION

Health behaviors regarding Toxoplasmosis play a very important role in preventing the infection that is caused by a parasite called Toxoplasma gondii that considered one of the most widespread parasitic pathogens, infecting a wide range of avian and mammalian hosts, including humans (Ribeiro et al., 2025). Prevalence among populations varies by geographical region, cultural factors, and level of development. The average global seroprevalence rate of Toxoplasma gondii in humans is approximately 25.7%, although this rate varies significantly, ranging from as low as 0.5% to as high as 87.7% (Owusu-Dommey, Pogreba-Brown, & Villa-Zapata, 2020). One third of the general population is infected with toxoplasma with high heterogeneity between countries and regions (Bigna et al., 2020).

Toxoplasma gondii infection is acquired by unsuitable behaviors as eating raw or undercooked meat with tissue cysts and ingesting oocysts from contaminated soil or water shed by cats. It can also be transmitted through vertical transmission from mother to fetus during pregnancy (Dahmani, Aiza, & Zenia, 2025). Toxoplasmosis poses significant health risks, particularly for females at reproductive age especially pregnant women as they have a weak immune system that putting them at a markedly higher risk than the general population (Mohammed, 2022).

Most infected people are asymptomatic, but some may experience mild flu-like symptoms. These symptoms resemble those of various common illnesses, particularly viral infections, which can make it challenging to immediately identify toxoplasmosis (Mohammed, Ahmed, & Ibrahim, 2024). Some patients may report muscle pain or stiffness, which can be either localized or widespread. Additionally, lymph nodes, particularly in the neck, may become swollen, and inflammation caused by T. gondii can lead to sore throat discomfort, characterized by pain and irritation (Attias et al., 2020).

There is currently no commercial vaccine available for the prevention of toxoplasmosis, which underscores the importance of adopting effective preventive measures to mitigate the risk of infection. These measures can be classified into several

categories as primary prevention, which focuses on implementing strict hygiene practices and food safety measures, particularly during pregnancy, to minimize exposure to the parasite (Shoesmith et al., 2021).

Conducting educational programs about toxoplasmosis, especially for women at reproductive age as they will be the future mothers and will be most at risk, as well as educating the public and healthcare workers as nurses on risks and prevention measures can help reduce incidence and protect vulnerable populations (Rincón Uribe et al., 2021).

Nurses play a crucial role in identifying and managing toxoplasmosis through assessment, education, prevention strategies, and continuous support. Their engagement and advocacy significantly enhance care outcomes. As toxoplasmosis often presents without symptoms, it is essential for pregnant women to receive education about the disease, as well as preventive strategies, to effectively reduce infection rates and protect both their health and that of their unborn children. So, the role of nurse is very critical in pregnancy (Ranoto, Ntimana, Mamogobo, & Maimela, 2025).

Significance of the study

According to Abd El-Aal, Safaan and Abd El-Monem (2021), the global annual prevalence of toxoplasmosis is estimated at approximately 190,100 cases. Prevalence rates in Arabian countries are notably high, with 38.4% in Iraq, 41.9% in Yemen, and 34.1% in Sudan. In Egypt, serological testing shows a chronic toxoplasma infection prevalence of 64.7%. These numbers highlight the significant burden of toxoplasmosis in the region and emphasize the need for ongoing surveillance and preventive measures.

Studies in Egypt indicate that there is limited data on toxoplasmosis preventive behaviors among women, with many females of childbearing age having insufficient information about preventive measures for toxoplasmosis infection (Senosy, 2022). So, this study was conducted to evaluate the health behavior of female university students in Port Said regarding toxoplasmosis.

Operational definition

Health behavior refers to actions that individuals take and affect their health and well-being. It includes behaviors related to maintaining health, preventing illness, and managing diseases. These include behaviors such as properly cooking meat to safe temperatures and avoiding the consumption of raw or undercooked meat, washing hands after handling raw meat, cleaning kitchen surfaces, wearing gloves while gardening, washing fruits and vegetables thoroughly before consumption, wearing gloves while handling cat litter, and cleaning litter boxes daily (Rimer & Viswanath, 2024).

AIM OF THE STUDY

To assess the health behavior of female university students regarding Toxoplasmosis.

Study question:

- What is the level of health behavior of female university students regarding toxoplasmosis?

SUBJECTS AND METHOD

I. Technical design

This design includes a description of the research design, setting, subjects, and tools of data collection.

Study design

A descriptive research design was employed in this study.

Study setting

The current study was carried out at Port Said University Campus of Girls that is located in Port Fouad City.

Sample size

It included all students presented in block A, their number was 488 girls who agreed to participate in this study.

Study sample

The study subjects consisted of a purposive sample of female university students in Port Said University Campus of Girls.

Inclusion criteria

- Any female student registered in Port Said University Campus for Girls and agreed to participate in the study.
- **Exclusion criteria**
- Medical and Para medical students (Faculty of Nursing, Medicine and Pharmacy), because of their prior knowledge that might bias results.
- Any student who had a previous toxoplasmosis infection.
- Any student who attended educational programs about toxoplasmosis.

Tools for data collection:

A Self-administered questionnaire that was developed by the researcher after reviewing related literature. It was divided into: (1) Socio-demographic data and (2) Health behaviors of female university students regarding toxoplasmosis.

Section 1: Socio-demographic data of the studied sample:

It included personal data such as age, faculty, academic level, residence, and questions such as does the family own a shelter with pets. It also included family history with toxoplasmosis during pregnancy.

Section 2: Health behaviors of female university students regarding toxoplasmosis:

It was designed by the researcher after reviewing related literature to determine

the health behaviors of female university students regarding toxoplasmosis. The tool included nine main questions assessing hygiene practices related to food handling and sanitation, including washing hands after gardening, handling meat, and trash, thoroughly washing vegetables, avoiding unboiled milk and untreated water, and disinfecting eating utensils.

As well, this section included another eleven questions for only students having pets. The questions were focusing on hygiene and safety practices related to pet care, including hand washing after handling pets or their waste, avoiding contact with contaminated surfaces, cleaning litter boxes regularly, following health guidelines to prevent toxoplasmosis, using gloves when disposing of feces, vaccinating pets, feeding them properly, and ensuring regular veterinary check-ups.

Scoring system:

Questions were answered by "Yes" or "No". The questions will be given a score of one in the case of "Yes" and zero in the case of "No". The overall female's health behavior score was described as suitable: ≥70% (9-6 points), fair: 50 to <70% (5-4 points), and poor: <50% (3-0 points).

II. Operational design:

The study field of work was carried out through the following phases:

Preparation phase

It included reviewing literature, diverse studies and theoretical insights on the research topic using books, articles, internet, periodicals and magazines. The tool had been modified, and it had been tested through a pilot study and a jury of experts in the study field.

Tool's validity

It was ascertained by a Jury consisting of seven experts from academic obstetrics

and gynecological nursing and necessary modifications were performed according their opinions. The experts reviewed the tool for clarity, consistency and appropriateness of content, the sequence of items, accuracy, relevance, comprehensiveness, simplicity and applicability of the tool. The tool was modified according to jury opinions such as removing questions that have the same meaning, rephrasing questions directly, replacing unfamiliar terms with other recognized ones that carry the same meaning, adding some questions and removing some questions that are irrelevant. Validity of the research tool was preserved following a translation procedure by experts in English language.

Tool's reliability

Internal consistency and a reliability coefficient (Cronbach's alpha) of the components of the tool of data collection were tested by the Statistical Package for Social Sciences (SPSS) software, version 22. The Cronbach's alpha value (internal consistency) for health behavior of female university students regarding toxoplasmosis was 0.847 which indicated high reliability.

Pilot study

Before beginning the actual data collection, a pilot study was carried out approximately through two weeks on 10% of the total number of the sample (49 girls) taken from block B specifically to avoid confusion or any mistakes while collecting the final sample to evaluate the clarity, feasibility and applicability of the study tool. Modifications on the data collection tool were done according to the results of pilot study. Students who participated in the pilot study were not included in the final study sample.

Field work

- Before beginning the collection of the data, agreements from the Vice President of Port Said University for Education and Students and the Director of Port Said University Campus were obtained, this step was taken at the last week of October 2024, after informing them about the purpose of the study.
- The study was conducted after taking a written consent from students and the

questionnaire was filled in by them. The purpose of the study was simply explained to them before data collection.

- The data have been collected and completed over a period of three months; the actual field of work was carried out from the end of October (2024) to the end of January (2025). The researcher was available twice a week (Sundays & Tuesdays) from 11:00 a.m. to 3:00 p.m.. Collecting the pilot study sample took 2 weeks, while collecting the total sample size took 10 weeks.
- Data were categorized, checked and revised by the researcher, and then data were statistically analyzed.
- The present study consumed about five and half months; a half month of them for obtaining official permissions, another half for the pilot study and test clarity and feasibility of tool. The next two and a half months were consumed for data collection, while one month was dedicated for data entry and another one month for statistical analysis.

Ethical considerations

Approval was obtained from the Research Ethics Committee of the Faculty of Nursing at Port Said University with code number NUR (3/8/2025) (52). The purpose of the study was explained to the participants prior to obtaining their written consent to share in the study. Participants received a brief overview on the study and were assured that all information would be treated strictly confidential and used only for research purposes. Participants received the assurance that participation is voluntary and they have the right to join or withdraw from the study at any time, at any stage without giving any reason.

III. Administrative design:

Before stating any step in the study, an official letter was issued from the Dean of the Faculty of Nursing, Port Said University to Vice President of Port Said University for Education and Students. This letter included the aim of the study and requested approval for the study conduction. The aim of the present study was explained to the female

university students who were included in the study and their permissions were also taken.

V. Statistical design:

The collected data were stored, organized and categorized, then converted into specialized formats and subjected to statistical analysis. All statistical analyses were conducted using the SPSS for windows, version 22.0 (SPSS, Chicago, IL). Continuous data were normally distributed and were reported as Mean ± Standard Deviation (SD). Categorical data were presented as counts and percentages. The reliability or internal consistency test for the current study' questionnaire was calculated. Significance level of $p < 0.05$ was adopted for statistical tests.

RESULTS

Table (1) demonstrates that the mean age of the studied group was 19.99±2.87 years, while 52.5% of studied students were studying in practical faculties and 26.6% of them were in second academic level. As well, a percentage of 60.2% of them live in rural areas.

Table (2) reveals that most of the studied group (97.1%) did not have family history of toxoplasmosis, while only 2.9% had family history. Of those who had family history, the affected person was cousin in 64.3%.

Table (3) shows that 96.7% eat meat or poultry after cooking them thoroughly over the fire, 93.4% wash hands regularly after gardening or working in the garden, 95.1% eat vegetables after washing them well under water to remove any contaminated soil, and 90.6% regularly wash and disinfect eating utensils.

Table (4) shows that among students who own pets, 92.0% wash their hands after handling pets, 94.1% avoid touching surfaces that may be contaminated with pets' feces and 95.2% avoid touching pets' waste. As well, 88.8% clean the pets litter box regularly, 82.4% follow the recommended health guidelines for preventing toxoplasmosis, 90.9% avoid eating or drinking in areas that could be contaminated with pets' feces and 86.6%

wash hands thoroughly after cleaning areas where pets have been. However, 61.5% did not care about pet's health and avoid giving them raw food and 54.0% did not regularly visit the veterinary for checking pets.

Table (5) reveals that there was a statistically significant relation between age of the studied group's health behaviors level towards toxoplasmosis (P=0.028) where 46.2% of the studied group with suitable health behavior aged 18 - < 20 years. Additionally, there were a statistically significant relations between faculty and level of the studied group's health behavior level towards toxoplasmosis (P=0.041& 0.002 respectively), where 50.2% and 30.5% of the studied group with suitable health behavior were in students from practical faculties and in the first academic level respectively. As well, there was a highly statistically significant relation between ownership of pets in the studied group's health behaviors level towards toxoplasmosis (P<0.001), where 100% of the studied students with poor health behavior did not own pets.

Figure (1) displays that 61.7% of the studied group did not own pets, while 38.3% of them own pets.

Figure (2) presents that 86.1% of the studied group had a satisfactory and suitable level of healthy behaviors regarding toxoplasmosis, while only 4.1% had a poor level.

Figure (3) illustrates that 74.9% of the studied group who own pets had a satisfactory and suitable level of healthy behaviors regarding toxoplasmosis, while only 7.5% had a poor level.

Table (1): Distribution of the Studied Female University Students According to their Socio-demographic data (n=488)

Personal Characteristics	No	%
Age		
18-<20	213	43.7
20-22	208	42.6
>22	67	13.7
Mean ± SD	19.99± 2.87	
Faculty		
Theoretical	232	47.5
Practical	256	52.5
Academic level		
First	135	27.7
Second	130	26.6
Third	115	23.6
Fourth	108	22.1
Residence		
Rural	294	60.2
Urban	194	39.8

Table (2): Distribution of the Studied Female University Students According to their Medical History (n=488)

Medical History	No	%
Family history with toxoplasmosis during pregnancy		
Yes	14	2.9
No	474	97.1
The relation to the affected person	**N=14**	**%**
Cousin	9	64.3
Aunt	4	28.6
Sister	1	7.1

Table (3): Distribution of the Studied Female University Students According to their Healthy Behaviors Regarding Toxoplasmosis (n=488)

Items	No		Yes	
	No	%	No	%
Eat meat or poultry after cooking them thoroughly over the fire	16	3.3	472	96.7
Wash your hands regularly after gardening or working in the garden	32	6.6	456	93.4
Wash your hands after handling meat or before cooking it	61	12.5	427	87.5
Wash your hands before preparing food and before eating	87	17.8	401	82.2
Eat vegetables after washing them well under water to remove any contaminated soil	24	4.9	464	95.1
Avoid drinking unboiled milk	68	13.9	420	86.1
Avoid drinking untreated or unknown source of water	59	12.1	429	87.9
Regularly wash and disinfect eating utensils	46	9.4	442	90.6
Wash hands after cleaning the trash can	100	20.5	388	79.5

Table (4): Distribution of the Studied Female University Students according to their Healthy Behaviors Regarding Toxoplasmosis in the Case of Owning Pets (n=187)

Items	No		Yes	
	No	%	No	%
Wash hands after handling pets	15	8.0	172	92.0
Avoid touching surfaces that may be contaminated with pets' feces	11	5.9	176	94.1
Avoid touching pets' waste	9	4.8	178	95.2
Clean the pets litter box regularly	21	11.2	166	88.8
Follow the recommended health guidelines for preventing toxoplasmosis	33	17.6	154	82.4
Avoid eating or drinking in areas that could be contaminated with pets' feces	17	9.1	170	90.9
Wash hands thoroughly after cleaning areas where pets have been	25	13.4	162	86.6
Wear gloves when disposing of pets' feces	42	22.5	145	77.5
Vaccinated pets against toxoplasmosis	115	61.5	72	38.5
Care about your pet's health and avoid giving them raw food	61	32.6	126	67.4
There is a regular veterinary visit for checking pets	101	54.0	86	46.0

Table (5): Relation between Socio-demographic data of the Studied Female University

Variables	Health behavior level						Significance test	
	Poor		Fair		Suitable			
	No	%	No	%	No	%	X^2	P
Age								
18-<20 (213)	4	20.0	15	31.3	194	46.2	10.876	0.028*
20-22 (208)	10	50.0	25	52.1	173	41.2		
>22 (67)	6	30.0	8	16.7	53	12.6		
Faculty								
Theoretical (232)	8	40.0	15	31.3	209	49.8	6.395	0.041*
Practical (256)	12	60.0	33	68.8	211	50.2		
Academic level								
First (135)	1	5.0	6	12.5	128	30.5	21.340	0.002**
Second (130)	4	20.0	12	25.0	114	27.1		
Third (115)	7	35.0	20	41.7	88	21.0		
Fourth (108)	8	40.0	10	20.8	90	21.4		
Residence								
Rural (294)	11	55.0	25	52.1	258	61.4	1.810	0.404
Urban (194)	9	45.0	23	47.9	162	38.6		
Ownership of pets								
Yes (187)	0	0.0	13	27.1	174	41.4	16.707	<0.001**
No (301)	20	100.0	35	72.9	246	58.6		
Family history of toxoplasmosis								
Yes (14)	0	0.0	1	2.1	13	3.1	0.774	0.679
No (474)	20	100.0	47	97.9	407	96.9		

Students and their Health Behaviors Level towards Toxoplasmosis (n=488)

X^2: Pearson Chi Square test, * Statistically Significant at P≤0.05

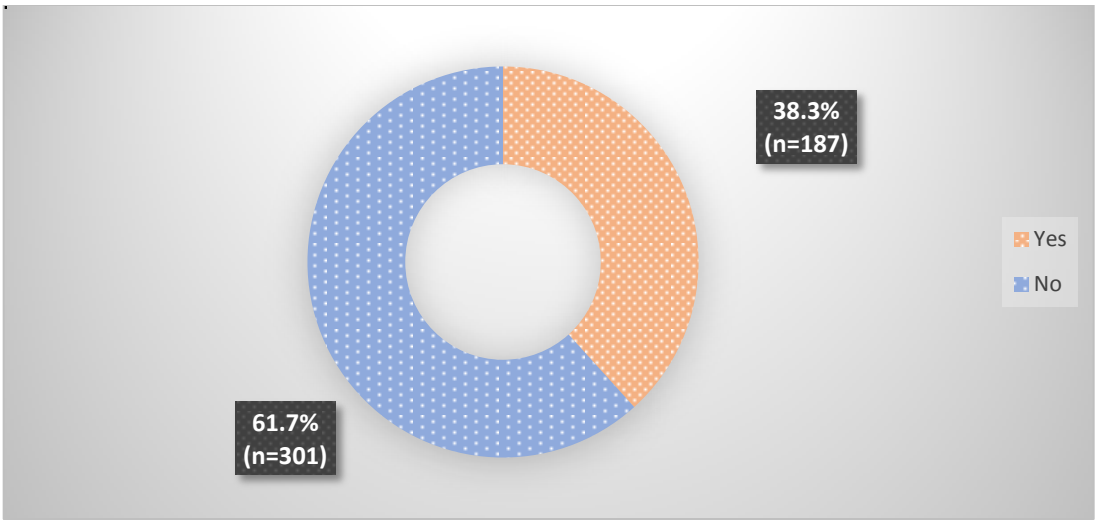

Figure (1): Distribution of the Studied Female University Students According to Their Ownership of Pets (n=488)

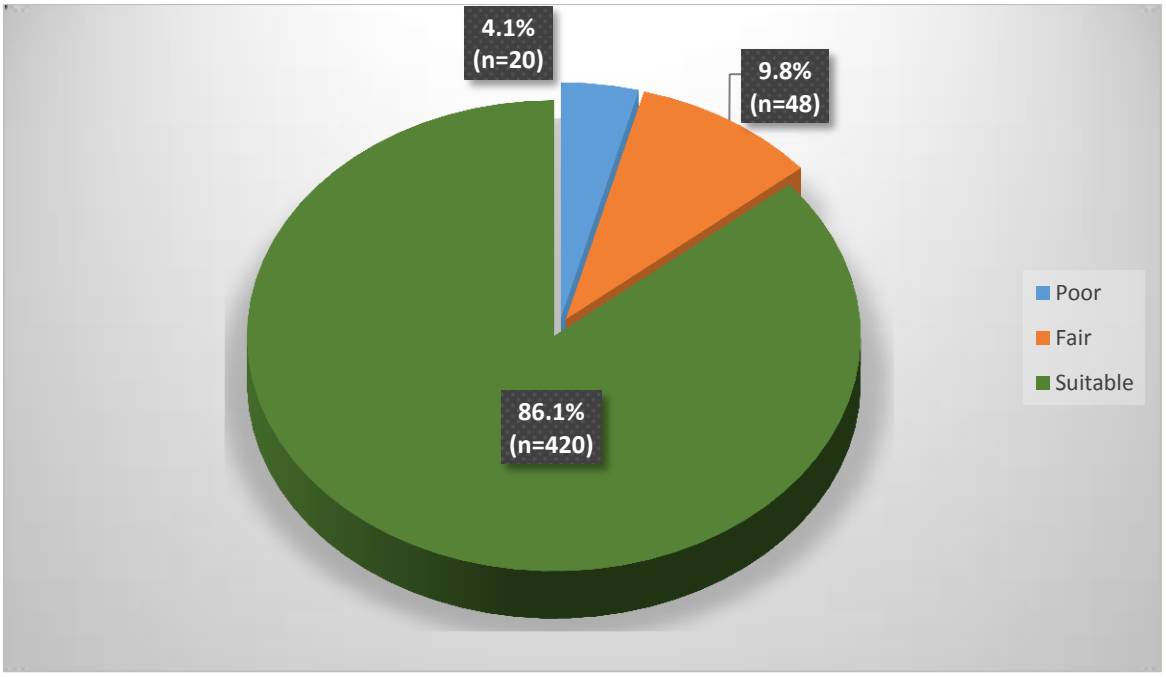

Figure (2): Level of Healthy Behaviors Regarding Toxoplasmosis among Female University Students towards Toxoplasmosis (n=488)

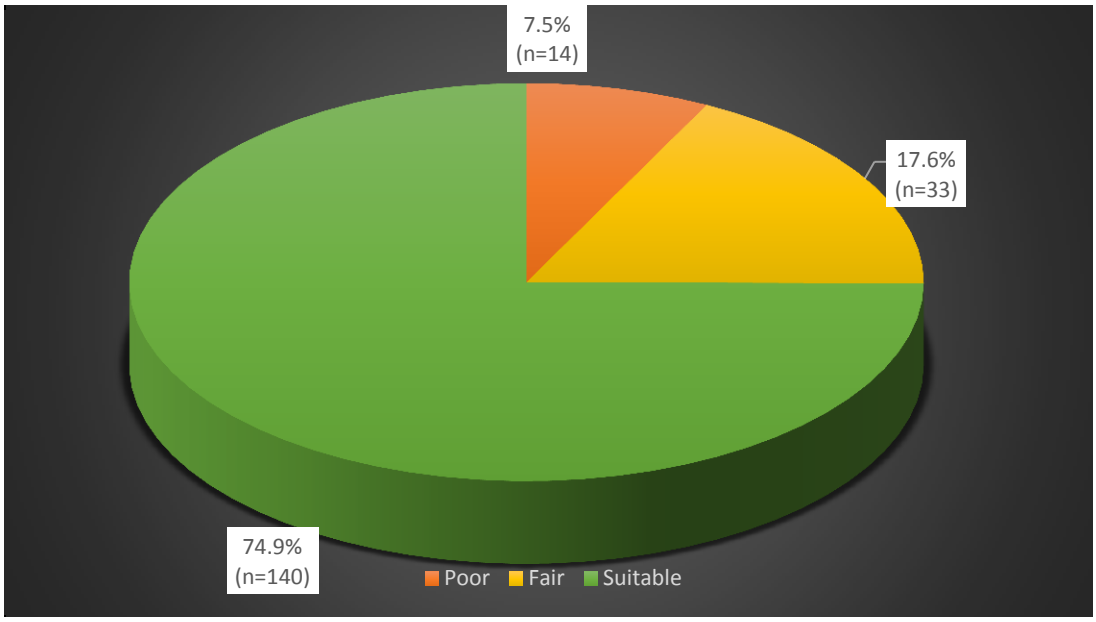

Figure (3): Level of Healthy Behaviors Regarding Toxoplasmosis in the Case of Owning Pets among Female University Students Towards Toxoplasmosis (n=187

DISCUSSION

In relation to health behavior of female university students regarding toxoplasmosis, the findings of the current study proved that most of the studied sample reported satisfactory and suitable healthy behaviors regarding toxoplasmosis. These results were supported by those of a research conducted by Afina and Mediana (2022), where more than two thirds of women in childbearing age had a good preventive behavior against toxoplasmosis and this may be because many women of childbearing age, particularly during pregnancy, are more conscious of the risk of various infections so they have attended educational programs during antenatal visits, prompting them to engage in effective preventive measures.

The findings of the current study were in the same line with those of Paul, Mkupasi, Martin and Katakweba (2024), who studied community knowledge, attitudes, and practices about toxoplasmosis in Unguja Island, Tanzania which revealed that, the majority of the studied sample did not eat under cooked meat and less than two thirds did not drink raw milk, which is lower than this study percentage and this may be attributed to difference in culture. On the other hand, the same study is in conflict with this in the point of drinking bottled or boiled water as almost three quarters of their study sample had a poor healthy behavior while this study results found that the majority had a suitable healthy behavior.

In contrast to the present study results, which revealed that most of the students were washing fruits and vegetables before eating and also were eating only well cooked meat, Suliman et al. (2024), who studied "Toxoplasmosis prevention: knowledge and practices among pregnant women in Jordan" and found that almost one third of pregnant women did not wash fruits and vegetables before eating which is a bad result while about less than nearly one quarter did not eat meat after cooking it well on the fire which means that a lot of them were eating raw meat.

Regarding to health behavior of the current study students, who had pets, They represented less than half of the total number of the studied group. This study results reported that more than three quarters of the studied sample had a satisfactory level of

healthy behaviors regarding toxoplasmosis, while the minority of them reported poor level.

In the same line with the results of this study, Nurseha, Mashuri, Pamungkasari and Maulani. (2023), who studied knowledge, attitudes, and behavior to prevent transmission of toxoplasma gondii among cat owners, revealed that their studied sample had appropriate healthy behaviors as the majority was washing their hands regularly after changing cat's litter box, about two thirds was cleaning cat's litter box every day. And more than half was wearing personal protective equipment (mask or gloves) when handling cat or disposing feces. Moreover, the majority was avoiding giving cats raw food and finally, less than half was going to the Pet shop/Veterinarian for a routine pet health check.

Additionaly, Tamiru, Abdeta and Amante (2022) study revealed that, more than one third of household pets'owners in Sibu Sire, Jimaa Arjo, and Wayu Tuqa districts in Western Ethiopia gives a regular veterinary service to their pets. From the researcher's point of view, the low percentage of people going for a veterinary visit for checking pets may be due to cost concerns as many pet owners may find it expensive, as well as lack of access to such clinics especially for those living in rural areas and lack of awareness about its importance.

Moreover, Maartens (2024), who studied "Awareness and evaluation of preventive measures for Toxoplasma gondii infection among pregnant women", found that the majority of the studied sample had a high degree of self-reported preventive behavior. In addition, they were avoiding risky behaviors about contracting infectious diseases such as toxoplasmosis, but they didn't always know what they were avoiding.

Concerning the relation between total health behavior score of studied sample and general characteristics, the present study results proved that there was no statistically significant relation between female university students' total health behavior score and their place of residence and family history of toxoplasmosis ($P>0.05$). However, it revealed that there were statistically significant relations between female university students' total health behavior score and their age, type of faculty, academic level of education and ownership of pets.

This study result came with the same line with a very current study of Alghafari (2025) who studied "Toxoplasmosis knowledge and preventive behaviors among pregnant women in Jeddah, Saudi Arabia" and found that having owned cats, was significantly associated with the responses of participants towards preventive behaviors as people owing cats had better health behaviors than those who were not.

In the same line with the results of current study, Samadi and Sadat (2025), who studied "Knowledge, attitude, and practice (KAP) toward zoonoses among Kabul University Students, Afghanistan" found that age and faculty had a statistically significant association with the practices of the students regarding zoonoses ($p < .05$).

On the other hand, the present study results contrasted with those of Barimah et al. (2023), who studied the "Knowledge and awareness among selected tertiary students from Ghana University on zoonotic infections" and found that there was no statistically significant association between age, type of college and academic level of study with the practices of the students.

From the researcher's perspective, more than half of the students with suitable health behaviors came from practical faculties. This can be attributed to the emphasis on health and well-being in programs such as health sciences, engineering, and physical education. Students in these fields are often more aware of health behaviors due to their education and have a greater intrinsic motivation to adopt healthy lifestyles as they prepare for careers focused on health issues. Additionally, practical faculties provide resources like workshops, fitness programs, and health screenings that encourage healthy behaviors among students.

From the researcher's study findings, almost all of the students with poor health behaviors didn’t own pets and this might be attributed to the awareness and presence of a background of health risks related to toxoplasmosis in pets' owners. They are more likely to practice good hygiene, such as proper litter management and frequent hand washing. In contrast, individuals without pets may be due to not having a previous background about these risks, they neglect preventive measures and are lacking the motivation to implement them in their daily lives. The responsibilities of pet ownership foster routines that enhance health behaviors, leading to practices that reduce infection risk. Those without pets may not develop similar routines and may be

also exposed to environmental health risks, such as contaminated soil and undercooked meat.

Limitation of the Study

Additionally, it was challenging to get data from students in the morning as most of the students were in their faculties and the best time was after 2.00 p.m.

CONCLUSION

Based on the findings of the present study, it can be concluded that:

Almost three fifths of students didn't have any pets and most of them didn't have family history about toxoplasmosis. However, 86.1% of the studied group had a satisfactory and suitable level of healthy behaviors regarding toxoplasmosis and only 4.1% had a poor level. On the other hand, students who have pets had a better health behavior than those who didn't.

RECOMMENDATIONS

Based on the results of the present study, the following recommendations were suggested:

- Developing handouts and distributing them among students in the university about safety practices while dealing with pets and on the importance of pets' vaccination and regular veterinary visits for those having pets to prevent any infectious diseases.
- Emphasizing on preventive measures through workshops for students about safe food practices and on the importance of good hygiene.

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السلوك الصحي لطالبات الجامعة حول داء المقوسات

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الخـــلاصـــــــــة

يعتبر داء المقوسات من القضايا الصحية العامة التي تؤثر على الإنسان والحيوان، وغالبًا ما يكون بدون أعراض بفضل قوة الجهاز المناعي الذي يتحكم في معدل الإصابة. هدف البحث: تهدف هذه الدراسة إلى تقييم مستوى السلوك الصحي للطالبات الجامعيات حول داء المقوسات. طرق وأدوات البحث: استخدمت الدراسة الحالية التصميم الوصفي. وقد أُجريت هذه الدراسة في جامعة بورسعيد، وتحديدًا في حرم المدينة الجامعية للبنات بمدينة بور فؤاد. وقد تم اختيار عينة هادفة مكونة من 488 طالبة من جامعة بورسعيد. واعتمدت الأداة الأساسية لجمع البيانات على استمارة استبيان ذاتية التعبئة، قسمت إلى: (1) البيانات الديموغرافية للطالبات المشاركات و (2) السلوك الصحي تجاه المرض والذي شمل تسعة أسئلة لجميع الطالبات حول ممارسات السلامة في الأكل والطهي والنظافة، إضافة إلى 11 سؤالاً للطالبات اللواتي يمتلكن حيوانات أليفة فقط، تتركز حول نظافة الحيوانات الأليفة، والنظافة الشخصية أثناء التعامل معها، والتطعيمات وكذلك نوعية طعام تلك الحيوانات. وقد وُصف بأنه مناسب ومعتدل وضعيف. النتائج: أشارت النتائج إلى أن 86.1% من عينة البحث كن يتبعن سلوكيات صحية جيدة ومناسبة للتعامل مع المرض، في حين أن 4.1% فقط كانوا ذوو سلوك صحي ضعيف وأن 38.3% منهن فقط كن يمتلكن حيوانات أليفة في حين أن 74.9% ممن يمتلكن حيوانات أليفة كن تمتلكن مستوي مناسب من السلوك الصحي. بالإضافة إلى ذلك، كانت هناك علاقة ذات دلالة إحصائية بين العمر، الكلية، المستوى الأكاديمي وامتلاك الحيوانات الأليفة، والسلوك الصحي للطالبات الجامعيات فيما يخص داء المقوسات. الخلاصة: يُلاحظ أن السلوك الصحي لدي الطالبات مناسب وجيد فيما يخص داء المقوسات. التوصيات: يُنصح بالتركيز علي عمل ورش عمل لطالبات الجامعة حول التغذية الصحية وكذلك ممارسات السلامة للوقاية من أي أمراض معدية.

الكلمات المرشدة: السلوك الصحي، داء المقوسات، طالبات الجامعة.