Do medical students enjoy a good Quality of Life? A Cross-Sectional Survey

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Date of Submission : 10-08-2018 Date of online Publication : 15-10-2018
Date of Acceptance : 15-09-2018 Date of Print Publication : 31-12-2018

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ABSTRACT

Background: Quality of life is defined as individual perception of well-being, within one’s socio-cultural context or the satisfactory fulfillment of desires and pleasures that would lead to the accomplishments of their perception. This study was carried out to determine the level of such satisfaction among medical students. Participants and Methods: In this cross-sectional study, one hundred twenty-five students were invited to participate in the study being chosen through stratified random sampling. Twenty-five students from each of the five classes of Gujranwala Medical School, Gujranwala, Pakistan, were invited. One hundred students completed the proforma containing WHOQOL-BREF questionnaire and socio-demographic characteristics. Results: According to the perception and response of the students, only one percent students had a very poor quality of life. 57% students were of the view that they have a good quality of life and 29% have answered the questionnaire indicating a very good quality of life in all four domains of WHOQOL-BREF. There was no significant effect of gender, year of study and living with family status on quality of life. Conclusion: This study demonstrates that the majority of the medical students have a good quality of life while a negligible number of them have a poor or very poor quality of life. Students are especially more satisfied with their physical health when compared with other domains of life and as usually observed, majority of them rarely have feelings of anxiety, depression and despair.

Key-words: Quality of Life, Medical students, Depression, Anxiety, Physical health.

INTRODUCTION

Quality of life is the general well-being of individuals and societies. Life as a medical student poses particular challenges and stress that have an impact on quality of life due to heavy academic workload. It is a result of interplay among social health, physical and psychological development during their academic session. Mental problems such as stress, anxiety, depression and impaired cognitive ability have been described among medical students and are associated with their academic and professional performance.

General wellbeing encompasses the assessment and control of environmental factors that have a potential to impact individual behaviors which can potentially affect the quality of life. It also refers to the ability of a student to adapt comfortably to different social situations and act appropriately in a variety of settings during academic life. Several studies have assessed the quality of life among medical students. A general notation is that the medial students encounter higher level of stress, which undermines their quality of life. However, students who demonstrate a higher ability for resilience have a better quality of life due to their ability to adjust and incorporate a better perspective and coping strategies to overcome stress. Medical students experience lower quality of life when compared with the general population that reflects on their overall outlook and academic achievements. It also has a negative impact on the society as well.

Local data considering the quality of life of the medical students of the public Pakistani colleges are scarce. Therefore, the current study was undertaken to assess quality of life among medical students and to explore the influencing factors at of such colleges; Gujranwala Medical School, Gujranwala, Pakistan.

PARTICIPANTS & METHODS

This cross-sectional survey carried out in the period between November 2015 to December 2016. The sample size was calculated considering the rate of the expected poor quality of life among medical students of about 10% that gave rise to a sample size of 97 at 6% margin of error at 95% confidence level. Stratified random sampling technique was applied. Study Population and setting: Gujranwala Medical School, Gujranwala, Pakistan, with a total number of students in the five classes of MBBS of 475. A self-administered proforma containing World Health Organization Quality of Life (WHOQOL-BREF) was used as data collection tool. It contained questions regarding all four domains of life, i.e., physical,
psychological, social and environmental domains. Data collection procedure and analysis: After approval from local ethical committee, an informed consent was taken from selected students. From each of five classes, 25 students were invited to participate in the study after random selection. One hundred students completed the proforma correctly. A Likert scale for answering was given and scored according to instructions of WHOQOL-BREF.

Data was analyzed using Statistical Package for Social sciences (SPSS) version 19.0. Categorical data like gender, year of study were presented as frequencies and percentages. Summarized quality of life results (as good, neutral and poor) were cross-tabulated for gender, year of study (first three years as preclinical and last two years as clinical) and their residential status (living with family or not). Fischer exact test was applied to compare the difference. A p value <0.05 was taken as significant.

RESULTS

One hundred students filled the questionnaire completely. The mean age of respondents was 22 years ranging from 19 to 24 years. Among sampled population, 25 students were male and 75 were female. Eleven students (11%) were living with their family while rest were in boarding/hostel. Only two students were of the view that they have a poor quality of life overall. Twelve students remained neutral in responding to overall quality of life, i.e. neither good nor bad. The responses of the sampled population in four domains defining the quality of life, i.e., physical, psychological, social and environmental domains were tabulated.

In the physical domain, we found that 10% of the students were dissatisfied with their physical health while 67% of the students were satisfied. 18% of the students were dissatisfied with their sleeping habits, 14% of the students were dissatisfied with their ability to perform while 69% were satisfied, 13% of the students were dissatisfied with their capacity to work while 77% were satisfied. In the social domain 5% of students reported dissatisfaction regarding their personal relationship, 6% were dissatisfied with the condition of living, 6% of students were dissatisfied with their support from friends. Nonetheless, majority of students enjoyed a good social life.

In the psychological domain, students were asked about negative feelings such as mood changes, anxiety, depression, despair etc. 44% of them are of the view that they never encountered such feelings, 35% of them had reported that they experience such feelings rarely and 24% often are disturbed by such feelings. Among sampled students, 40% students responded that after entering the medical profession there has been a little increase in their stress level, 42% felt a moderate increase, and 18% felt that there has been an extreme stress after entering medical school. 40% of students felt that they have more load than their capacity to work while 41% felt that there has been a moderate increase in academic load, 19% experienced an extreme increase in academic load with respect to their capacity.

Table 1: Simplified answers to questions in different domains of life (n = 100).

<table>
<thead>
<tr>
<th>Statements</th>
<th>Dissatisfied</th>
<th>Neutral</th>
<th>Satisfied</th>
</tr>
</thead>
<tbody>
<tr>
<td>How much are you satisfied with your health?</td>
<td>16</td>
<td>17</td>
<td>67</td>
</tr>
<tr>
<td>How satisfied are you with your sleep?</td>
<td>18</td>
<td>15</td>
<td>67</td>
</tr>
<tr>
<td>How satisfied are you with your ability to perform?</td>
<td>14</td>
<td>17</td>
<td>69</td>
</tr>
<tr>
<td>How satisfy are you with your capacity to work?</td>
<td>13</td>
<td>10</td>
<td>77</td>
</tr>
<tr>
<td>How satisfy are you with your personal relationships?</td>
<td>5</td>
<td>18</td>
<td>77</td>
</tr>
<tr>
<td>How satisfy are you with your condition of living?</td>
<td>6</td>
<td>21</td>
<td>73</td>
</tr>
<tr>
<td>How satisfy are you with your support from your friends?</td>
<td>6</td>
<td>10</td>
<td>84</td>
</tr>
<tr>
<td>How often do you have negative feelings like mood changes anxiety, depression and despair?</td>
<td>44</td>
<td>35</td>
<td>21</td>
</tr>
<tr>
<td>How much do you feel your stress have been increased?</td>
<td>40</td>
<td>42</td>
<td>18</td>
</tr>
<tr>
<td>How much do you feel that academic load is greater than your capacity?</td>
<td>40</td>
<td>41</td>
<td>19</td>
</tr>
<tr>
<td>How healthy is your physical environment?</td>
<td>28</td>
<td>49</td>
<td>23</td>
</tr>
<tr>
<td>To what extent do you have opportunity for leisure activity?</td>
<td>16</td>
<td>34</td>
<td>50</td>
</tr>
<tr>
<td>How well are you able to get around?</td>
<td>15</td>
<td>98</td>
<td>37</td>
</tr>
</tbody>
</table>

In consideration to the academic and social environment of medical students; some questions were also included in the questionnaire such as, how healthy is their physical environment; 28% were of the view that physical environment is a somewhat healthy, 49% answered that the environment is moderately healthy while, 23% felt that the environment is extremely healthy. 16% of medical students felt that they have little opportunity for leisure activity, 34% felt that they have moderate opportunity for leisure activity and 50% reported that they have significant opportunities. 15% of medical students felt that they have little opportunity to get around, 48% felt that they have moderate opportunity and 37% felt that they have significant opportunity to get around (Table 1).
DISCUSSION

The present study was designed to assess the general quality of life (QoL) of medical students using the WHOQOL-BREF index. In this era of extreme competition, the general health of an individual is extremely compromised; this is also true for the medical students, who have to deal with high academic workload, stress and demanding medical environment, impacting their overall wellbeing. Medicine being a significant tough profession has impact, not only on physical and physiological health of individuals but also on the environmental and behavioral patterns. Various studies have been done in the past to confirm this association. Some studies have shown that the negative effects and feelings of depression increase as the students go to higher classes(4,5, 13,14), whereas according to our study 44% of the students reported that they did not experience negative feeling while 35% seldom had such feelings. According to another study frequency of symptoms of depression increase in direct proportion to the duration of time spend in this profession. Higher ranks in profession, prolonged the stress and perfectionist type of personalities predispose medical practitioners to mental illness(15-17). In another study the earned score of students in social domain was at least 6.4 and at most 20 (mean = 13.7 and SE = 0.20). The score of students in environmental domain was between 5.5 and 20 (mean = 13.1 and SE = 0.16). No significant difference was seen between the female and male students in terms of environmental health level (3). Similarly, in our study, there was no significant effect of gender, year of study and living with family status on quality of life (Table II).

Overall, in this study, the students’ QoL are good in two areas, namely environmental and psychological health, and poor in physical health and social relationships. Our data indicates that as the student go higher in the levels starting years 1 to 5 of their medical training, the QoL decreases, spanning all four domains of analysis. Some studies have also reported that, internship level is of a crucial position as the QoL in this stage reaches to its lowest level(3). The present study demonstrated that majority of students have a general good quality of life; this is mostly influenced by a good quality of life in social domain. Secondly, a satisfactory quality of life with respect to environmental domain was also observed. Though, the personal relationships and physical health are the domains which are observed to be the least in terms of QoL. However, considering the overall average we conclude that the medical students experience a good quality of life as per the WHOQOL.

Conclusion

It is concluded that majority of the medical students enjoys a good Quality of life in public sector medical college of Pakistan. Medical students were found more satisfied with their physical health when compared with other domains. Limitations of the current study include single center study and smaller sample size. Further studies should be done to compare the medical students’ quality of life with general population or with the students of other professions.

Limitations of the Study

Limitations include a single center study with relatively small sample size. The student distribution is female dominant because of their relative proportion in the medical college.

REFERENCES


Conflict of Interest: None

Source of funding support: Nil