

SOCIOLOGICAL SURVEY «EVALUATION OF LIFE QUALITY AMONG THE STUDENTS OF 2-3 COURSES OF THE BELARUSIAN STATE MEDICAL UNIVERSITY»

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ABSTRACT

Nowadays the study of the quality of life (QOL hereinafter) in medicine is taken into greater consideration than it was before. This finished an opportunity to conduct a deeper research of the person's attitude to his/her health. In provided work in order to find patterns of deviation from normal values, such data as the QOL of female and male, the level of QOL of students at BSMU and regulatory measures were compared. According to a special terms «quality of life», «health-relation,» which are integral characteristics of the physical, psychological, emotional and social conditions of subjective perception of a person, some students (particularly medical students), being a part of the specific social group, were characterized by system of value orientations, social behavior, psychology, styles and conditions of life. The study of QOL level was conducted among 170 students of 2 - 3 courses of general medicine faculty at Belarusian State Medical University: 63 men (37%) and 107 women (63%) were involved in the study. The average age of respondents was 20 years. The method of the research was held as the open questionnaire survey. The findings of given study revealed the level of QOL of males and females studying at BSMU as practically identical. The QOL of BSMU students, control values of examinees people of certain age were compared, and as a result showed a significant reduction in the level of life quality in all aspects, except physical functioning, which indicators corresponded to the average statistical data. After an anonymous survey the results were accurately analyzed and compared with normal data. It may be concluded that the level of life quality among students of Belarusian State Medical University is slightly below the normal values.

KEYWORDS

Social Sciences, Humanities, Public Health, Value of Life

How to cite this article: Nikolayevski V, Klimec D, Tikhonovitch I. Sociological survey «Evaluation of life quality among the students of 2-3 courses of the Belarusian State Medical University». *Int Stud J Med.* 2016; 2 (1): 41-45

The World Health Organization in 1999 suggested to consider the term “quality of life” as an optimal condition, the degree of satisfaction in the system of human values (physical, emotional, social, etc.) and relationship of provision with objectives and capabilities of both individual and the population in general to achieve well-being and self-realization. In the broad sense, according to the UN definition the concept of QOL is a sociological category, which covers 12 aspects of living conditions, such as health, upbringing livelihoods, working conditions, social confidence, psycho-emotional state, and others. It is considered that the interpretation of the term in the medical QOL was first used in the journal “Annals of Internal Medicine” in 1966 year [1]. Since that time, especially in the last decade, the interest in exploring

the medical aspects of QOL has dramatically increased. According to the WHO definition, health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity. At present time a huge amount of researches, which is related to the level of QOL in different populational groups, is being done. However, at the moment there is no reliable information concerning the QOL of students of higher medical educational universities of Belarus (including BSMU).

Therefore the aim of this research is represented in exploring the level of life quality of students, comparing of obtained and regulatory data.

Despite the vast amount of different surveys to assess the level of QOL, the 36-Item Short-Form Health Survey (SF-36) is considered to be one of the most commonly used method, which is a general purposed eight scaled questionnaire, based on characterisations

Received: 28 February 2016/ Accepted: 16 March 2016/ Published online: 31 March 2016

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of physical, mental, social aspects of human activity and the level of quality of life as general [2, 3, 4]. It has normative parameters, which are based on studies of representative populations in various countries (USA, Canada, Norway, Sweden, and Russia) [5]. The study was conducted at the university during the period from 14 to 18 December 2015. 36 test items of paper versions of “SF-36 Health Status Survey” questionnaire were grouped in eight scales: physical functioning, role-playing activities, bodily pain, general health, vitality, social functioning, emotional state and mental health. Indicators of each scale were ranged between «0» and «100» (where «100» represents an ideal health). All scales form two indicators: mental and physical health. The results were presented in the form of estimates in certain order where a higher score indicated a higher level of quality of life. The following parameters were the subjects for quantitative evaluation:

1. Physical Functioning (in tables and graphs - PF), which illustrates the respondent's extent limitation of physical activity caused by the state of his/her health.
2. Role functioning caused by physical state (Role-Physical Functioning – RP), which refers to the degree of influence of physical health on a daily activities (work, performing daily activities).
3. Pain intensity (Bodily Pain – BP), which describes the extent of pain and the impact on physical ability to perform daily chores (household work, study, etc.).
4. General health (GH) – patient's assessment of his/her state of health at the present moment and prospects of the treatment.
5. Vitality (VT), which involves the feelings of being full of strength and energy, or, on the contrary, being exhausted.
6. Social Functioning (SF), which is determined by the degree of limitation of social activity (communication) basing on physical or emotional conditions.
7. Role functioning, which is caused by emotional state (Role-Emotional - RE) involving assessing of the extent to which emotional state obstructs the work or other daily activities.
8. Mental Health (MH) - a state of well-being, which is characterised by realisation of own abilities of individual, coping with the usual stresses of life, working productively and fruitfully and making a contribution to his/her community [6].

Scales were grouped into two measures “General physical health” and “General mental health”:

1. General Physical Health (GPH) is presented by such scales as physical functioning, role functioning caused by physical condition, the intensity of pain, general health.
2. General Mental Health (GMH) make up the scales “mental health”, “role functioning caused by emotional state”, “social functioning”, “vital activity”.

The survey results are presented in Tables 1-3 and in Figures 1, 2.

As noted earlier, the research of student's life quality at higher medical educational institutions of Belarus were not conducted. The findings of our study showed that the level of quality of life of males and females studying at BSMU is practically identical. However, it should be noted that the indicators of girls on such scales as a vitality and mental health is higher than that of boys. Figure 1 shows that the mental health component of the females a little higher. We compared the QOL of students of BSMU and normative values for the people of this age and showed a significant reduction in the level of life quality in all aspects, except for physical functioning, which corresponds to the average statistical data. (Fig. 2) Thus, compared with the norm, role functioning caused by emotional state reduced by 33%; role functioning caused by physical condition reduced by 21%; vitality was less than normal life activity by 21%; mental health reduced by 15%; “Body pain” scale reduced by 10%; social functioning below normal by 11%, and the general health decreased by 7%.

Thus, after an anonymous survey the results were accurately analyzed and compared with normal data. It may be concluded that the level of life quality among students of Belarusian State Medical University is slightly below the normal values. It was found that the role functioning caused by mental and physical condition is below normal (by 33% and 21%, respectively) that presume to estimate the educational load of student and the shortage of time for resting and social verbal contact. As the survey was conducted on the eve of the second period peak of the academic year, some students underestimated the vitality (below the norm by 21%) and mental

BRIEF COMMUNICATIONS

	GPH	GMH	PF	RP	BP	GH	VT	SF	RE	MH
Mean (M)	49.6	40.1	90.5	60.10	67.8	63.1	53.3	70.5	46.2	59.1
Mode	54.9	41.4	95	100	100	62	50	75	33	60
Median	48.9	41	95	75	72	65	50	75	33	60
Standart Deviation	5.8	8.1	8.2	29.9	23.6	17	14.9	19.2	29.40	14.7
Margin of Error (E)	0.80	1.1	1.1	4.2	3.8	2.4	2.1	2.7	4.1	2.0
M ± E	49.60 ± 0.80	40.00 ± 1.13	90.50 ± 1.14	60.10 ± 4.15	67.90 ± 3.27	63.10 ± 2.36	53.30 ± 2.06	70.50 ± 2.66	46.20 ± 4.08	59.10 ± 2.04

Table 1. QOL of females

	GPH	GMH	PF	RP	BP	GH	VT	SF	RE	MH
Mean (M)	49.30	37.8	90.8	57.3	64.2	67.6	45.5	68.6	45.1	53.9
Mode	62.5	45.6	100	50	62	77	55	75	33	64
Median	47.8	41.1	95	50	62	72	45	75	33	56
Standart Deviation	5.6	7.9	9.2	27.8	15.2	15.6	13.7	18.1	29	16.3
Margin of Error (E)	1.1	1.5	1.7	5.2	2.8	2.90	2.6	3.4	5.4	3
M ± E	49.30 ± 1.05	37.40 ± 1.47	90.80 ± 1.71	57.30 ± 5.16	64.20 ± 2.83	67.60 ± 2.90	45.50 ± 2.55	68.60 ± 3.35	45.10 ± 5.38	53.90 ± 3.03

Table 2. QOL of males

	GPH	GMH	PF	RP	BP	GH	VT	SF	RE	MH
Mean (M)	49,5	39,3	90,7	59,0	66,0	65,0	49,0	70,0	46,0	57,0
Mode	62,5	45,6	95	100	100	77	50	75	33	60
Median	48,6	41,0	95	50	62	67	50	75	33	60
Standart Deviation	5,9	8,0	8,6	29,6	20,9	16,8	14,3	18,7	29,40	15,40
Margin of Error (E)	1	1	1	3,20	2,30	1,80	1,6	2,1	3,2	1,7
M ± E	49,50 ± 0,64	39,3 ± 0,87	90,60 ± 0,95	59,3 ± 3,24	66,5 ± 2,30	64,20 ± 1,84	50,5 ± 1,57	69,9 ± 2,05	46,2 ± 3,23	57,2 ± 1,69

Table 3. The average level of QOL

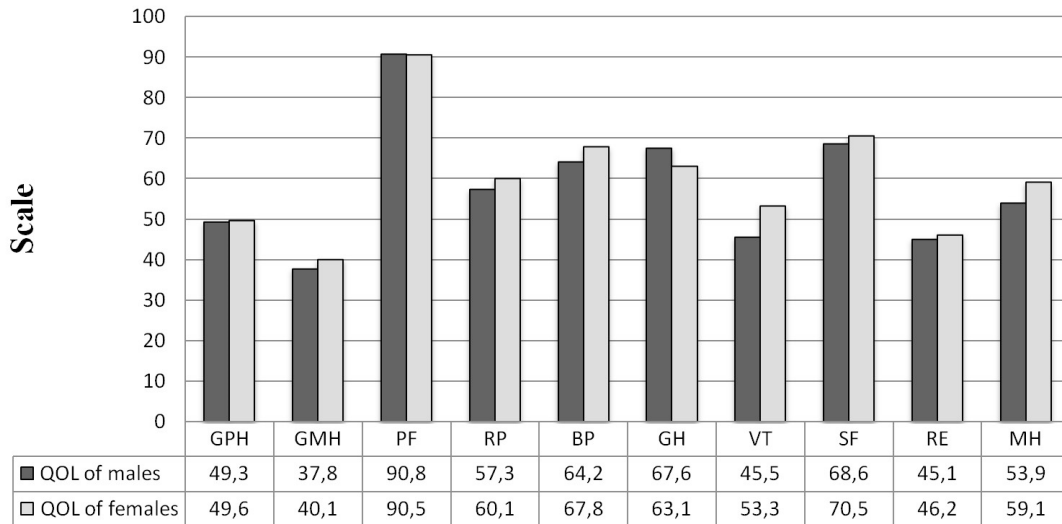


Fig 1. Quality of life of males and females

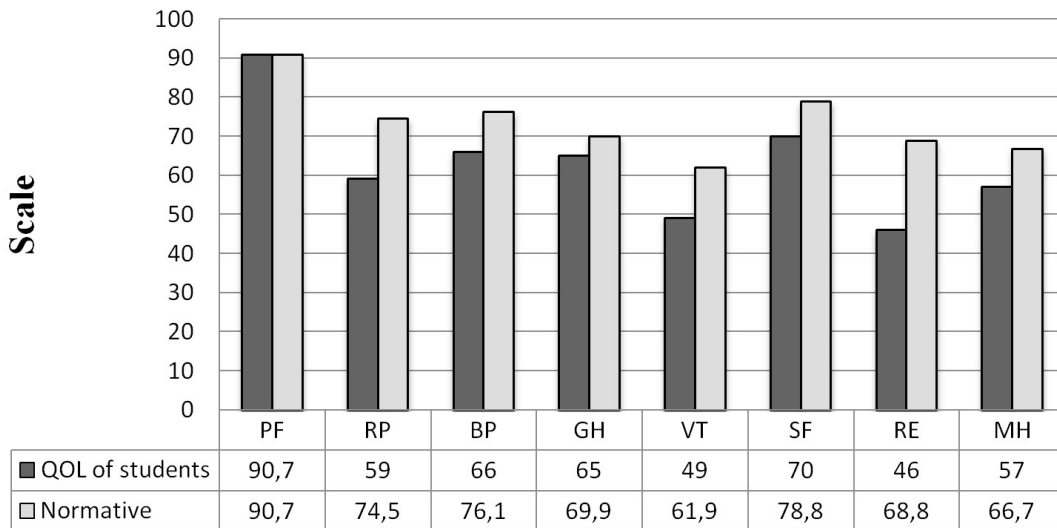


Fig 2. Comparing the level of the QOL of students and the QOL of normal values

health (less than normal value by 15%), what could be a reflection of the physical and psycho-emotional state of students before academic session. Indicators such scales as a vital activity and mental health were slightly higher than those of males (by 15% and 9%, respectively), what showed higher psycho-emotional stability of females.

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respectively) that presume to estimate the educational load of student and the shortage of time for resting and social verbal contact . As the survey was conducted on the eve of the second period peak of the academic year, some students underestimated the vitality (below the norm by 21%) and mental health (less than normal value by 15%), what could be a reflection of the physical and psycho-emotional state of students before academic session. Indicators of females on such scales as a vital activity and mental health were slightly higher than those of males (by 15% and 9%, respectively), what showed higher psycho-emotional stability of females.

CONFLICT OF INTEREST

The authors confirm that this article content has no

conflicts of interest.

AUTHOR CONTRIBUTION

All authors contributed to the study design, interpretation of the literature data, and the manuscript drafting. All authors read and approved the final version of the manuscript for publication. Research was supported by ISTC №B1636 and ГПНИ №1.2.42.

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