

Perceived Effects of Undergraduate Medical Study on Social Life: A descriptive Study at Poonch Medical College in Rawlakot Azad Kashmir

1. Malik Asrar Ahmed 2. Amir Ahmed 3. Zia-ur-Rehman

1. Asstt. Prof. of Surgery, 2. Asstt. Prof. of Orthopedic Surgery, 3. Prof. of Surgery and Principal, Poonch Medical College, Rawlakot, Azad Jammu & Kashmir

ABSTRACT

Objective: This study explored how second year medical students of Poonch Medical College related studying in medical college with their social activities.

Study Design: Cross-sectional study

Place and Duration of Study: This study was conducted with the first batch of students at PMC in Rawlakot AJ&K from January 2013 to July 2014.

Materials and Methods: This study obtained data in a purposive sample from the entire second year class using a structured self-administered questionnaire, with 88% response rate.

Results: Of total 88 respondents, 63 girls (72%) and 25 boys (28%) with a mean age of 19 participated. More than 80% respondents had many friends, 81% girls and 36% boys didn't have time to meet them ($p<.000$). Around 89% girls and 68% boys didn't have time to play ($p=.029$), 49% girls and 44% couldn't see their families ($p<.197$), 40% hostelite and non-hostelite could play ($p<.991$), and 76% boys and 65% girls perceived burdensome medical study which deprived them from regularly meeting with their family and friends.

Conclusion: Findings of this study have broader implications for furnishing academic environment in medical institutions of Pakistan more conducive, supportive and effective. Medical institutions should review their curriculum and teaching/learning schedules and try to redesign their educational programs keeping a balance between study load and the social life of a medical student. Students should also be encouraged to set their educational and social priorities and try to ensure this balance.

Key Words: Undergraduate Medical Study, Effects, Social Life.

Citation of article: Ahmed MA, Ahmed A, Rehman Z. Perceived Effects of Undergraduate Medical Study on Social Life: A descriptive Study at Poonch Medical College in Rawlakot Azad Kashmir. Med Forum 2015;26(3):12-16.

INTRODUCTION

Medical studies at undergraduate level are generally perceived to be highly demanding, depriving a student from enjoying his/her social life. A person's social life mainly involves availability of friends, time spent with family members, and access to recreational activities and sports. Academic environment in medical colleges is stressful which promotes competition rather than co-operation. Among various stress relieving factors, availability of social and emotional support by family and friends during tough situations and decreased workload¹(Solanki P, et al, 2012) have been realized as important components of the social environment of an institution²(Welsh A, 2010). Social support is an essential ingredient of a medical student's life for him/her to successfully transit through the tense educational environment. Social support, in terms of

sustained connection and communication with family and friends gives the feeling to a student that he/she is cared for, loved, esteemed and valued. The perceived social support, though subjective, entails that family and friends would provide quality assistance and useful help during the times of trouble³(Khodarahimi S, 2012). Though anecdotal with lack of scientific evidence, it is generally perceived that highly demanding medical studies socially isolate the students⁴(Blakey H, et al, 2008). The effect of unrelenting strain and stress on medical students' development into caring professionals is of great concern⁵(Sidhu J K, 2007). There is a need to further explore what seems to be an inverse relationship between the availability of a viable social support system and the highly demanding medical education and to identify factors which can help strengthen this relationship in a positive direction. This is very important to help alleviate undue stresses among the medical students by providing opportunities for social interactions with families, friends and peers which in turn can enhance their learning motivation, competency and the future performance.

Correspondence: Dr. Malik Asrar Ahmad,
Asstt. Prof. of Surgery, Poonch Medical College,
Rawlakot, Azad Jammu & Kashmir.
Cell No: 0323-4004413
Email: ajkdrasrar@yahoo.com

There is a dearth of literature on this topic, particularly in this part of the world, and for areas similar to AJ&K where social support system and family ties are the hallmark of socio-cultural infrastructure. Keeping its need and importance, we conducted this study for assessing how second year medical students at Poonch Medical College (PMC) perceived the effects of studying in a medical college on their social lives. The purpose of this study was to draw lessons for suggesting appropriate strategies to concerned authorities in Azad Jammu & Kashmir (AJ&K) so that a balance could be ensured between social and academic lives of undergraduate medical students

MATERIALS AND METHODS

This study was conducted during July 2014 with the first batch of students at PMC in Rawlakot AJ&K. The PMC started operating in 2013. The study was conducted after approval by ethical committee.

Study Population and Design: A cross-sectional descriptive study was conducted with the second year undergraduate medical students at PMC.

Sampling and sample size: Using Purposeful Sampling, we invited the entire second year class of 100 students (70 girls, 30 boys) to participate in the study.

Data Management: A self-administered structured questionnaire was used to obtain the data. Overall response rate was 88%. Each questionnaire took around 30 minutes for completion. The key study variables included age, sex, status of studentship (Hostelite, non-

hostelite), parents' occupation, number of friends, frequency of visits, and time spent with friends and family members before and after the admission in the medical college, time spent on sports, and factors (if any) which prevent them from spending desirable time with friends and family.

Data Analysis: Collected data was reviewed and cleaned manually, and entered into SPSS 19. Simple frequencies and proportions were generated. Cross tabulations for key study variables were done to draw statistically significant relationship. We also applied Pearson's Chi-square test on cross-tabulation to determine the p-value.

RESULTS

General and Demographic Information: We collected data from 88 (88% of total enrolled) undergraduate medical students of which 63 (72%) were female and 25 (28%) were male. Mean age of study population was 19.4. A. Twelve boys (48%) and 30 (48%) girls lived in hostels. About 28% boys and 35% girls reported that their fathers worked in a government institution while fathers of 20% boys and 21% girls had their own business (**Table.1**). Mothers of most students (84% boys, 67% girls) were house wives while 22% girls and 16% boys informed that their mothers were teachers. Most parents (89%) of responding students were alive and lived together (**Table.1**).

Table No.1: Socio-demographic characteristics of study participants by gender

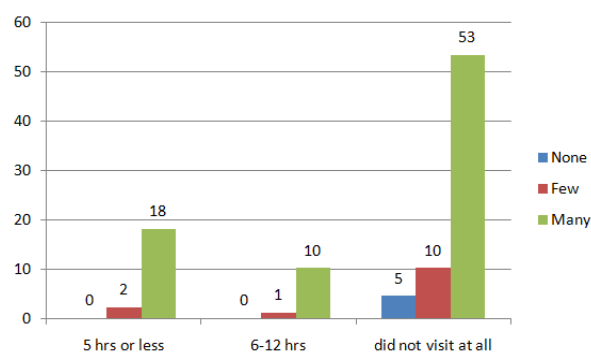
Characteristics	Variables	Male		Female	
		Number	Percentage	Number	Percentage
Age	<18	3	12	4	6
	19	11	44	34	54
	20	8	32	22	35
	21 or >	3	12	3	5
Status of studentship	Living with parents	8	32	31	49
	Living with relatives	3	12	1	2
	Living with friends	2	8	1	2
	Hostelite	12	48	30	48
Father's Occupation	Govt. servant	7	28	22	35
	Own business	5	20	13	21
	Teacher	3	12	9	14
	Doctor	2	8	5	8
	Other*	8	32	14	22
Mother's Occupation	House Wife	21	84	42	67
	Govt. servant	0	0	3	5
	Own business	0	0	2	3
	Teacher	4	16	14	22
	Doctor	0	0	2	3
Status of Parents	Living together	22	88	57	90
	Father died	2	8	6	10
	Mother died	1	4	0	0

*Other: Fruit Seller, Working abroad (3), Nothing (2), Contractor, Cook, Electric Engineer, Civil Engineer, deceased (4), Mason, Retired (2), Working in NGO, Banker

Table No.2: Social behaviors and characteristics of study participants by gender

Characteristics	Variables	Male		Female		P-value
		Number	Percentage	Number	Percentage	
Number of friends	Many	21	84	51	81	.417
	Few/None	4	16	12	19	
Frequency of visit to a friend in a week	12 hours or less	14	56	12	19	.000*
	More than 12 hours	2	8	0	0	
	Don't visit at all	9	36	51	81	
Perceived effect on frequency of visits to friends due to admission in the medical college	Visited friends more before admission in the medical college	15	60	36	57	.807
Average time spent on sports activities in a week after admission in the medical college	12 hours or less	6	24	6	10	.029*
	More than 12 hours	2	8	1	2	
	Don't have time to play at all	17	68	56	89	
Time spent with family members in a week after admission in the medical college	10 hours or less	9	36	12	19	.197
	11 hours or less	5	20	20	32	
	No time at all	11	44	31	49	
Perceived factors which affected time spending with family or friends	Hectic study schedule	19	76	41	65	.685
	Living in hostel hence away from friends	4	16	15	24	
	I am not social	2	8	7	11	

* 0.05 significance level

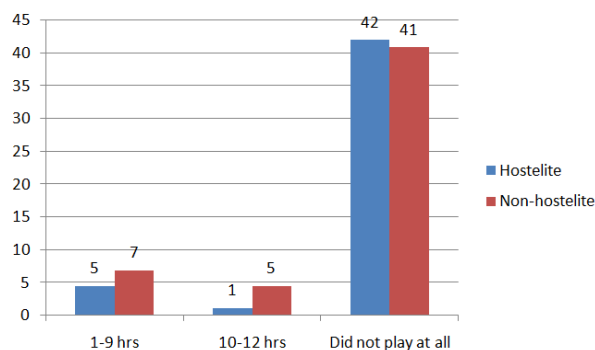


N=88 (boys=25, girls=63), P=.884

Figure No.1: Percentage of frequency of visits to friends in relation to the number of friends

Perceived Effects of Medical Studies on Social Activities: Cross-tabulations of various variables by gender pertaining to social activities were done. There was no statistically significant difference ($p < .417$) among boys and girls regarding the number of friends. However, the difference in gender-based response regarding the frequency of visit to friends was strongly statistically significant ($p < .000$). Similarly the gender difference for the amount of time spent on sports activity was also highly statistical significant ($p < .029$). More than 96% boys and girls informed that their families were social, but 49% girls and 44% boys reported that they didn't have time to spend with their family members after the admission in the medical

college ($p < .197$)(Table 2). However, 40% boys and 33% girls confessed that they didn't like social gathering. Further analysis of data revealed that 53% students who reported to have many friends, did not find any time to visit them, though difference between those who had many friends and those who had few/none was not statistically significant ($p < .884$)(Figure 1). The difference between hostelite and non-hostelite respondents regarding the amount of time spent on sports activity was also not statistically significant. More than 40% hostelite and non-hostelite participants informed that they didn't have time to spend on any sports activity($p < .991$)(Figure 2).



N=88 (boys=25, girls=63), P=.991

Perceived factors which affected students' social activities: Around 60% study participants were not

satisfied with their level of interaction with friends and family after the admission in medical college. Among various factors which reportedly affected their visits to friends and families, 76% boys and 65% girls mentioned hectic study schedule as the main factor, a very important finding but not statistically significant ($p < .685$). Around 24% girls and 16% boys attributed decreased frequency of visits to friends to their hostelite status (**Table 2**).

DISCUSSION

Medical education at undergraduate level is a lengthy and stressful process which aimed at producing knowledgeable, skillful and professional health care providers. The protracted medical educational process requires sustained integrity and stability among the students, which is generally determined by the academic environment and the available social support system. Our study aimed to explore perceived effects of studying in medical college on social and sports activities among the second year medical students of Poonch Medical College Rawlakot.

Our study primarily focused on determining the level of social exclusion among our study population. We used amount of interaction with friends and families, and the time spent on sports activities as the main variables for determining social activities. Most of our study participants who had many friends couldn't visit them and majority of them had a social family, but about half of them could not visit the family. These participants attributed it to studying in the medical college. The perception and attitude of new medical students towards medical education in relation to their social support is alarming and should be looked into the broader context of wellbeing. Six separate studies in Sri Lanka, UK, Iran, India, Malaysia and Bangladesh using the same instrument assessed students' perceptions of the educational environment^{6,7,8,9,10,11} (Palmgren P J., Chandratilake M, 2011, Lee J, Graham AV, 2001, Aghamolaei T, Fazel I, 2010, Unnikrishnan B, 2012, Lai NM, 2009, Nahar N, 2010). The instrument used "availability of friends" as one of the determinants of good educational environment. Another cross-sectional study regarding students' perception of medical school stress (Lee J, Graham AV, 2001) considered "talking and interacting with friends" as an important coping mechanism for decreasing stress⁷. Mane Abhay B et al. (2011) in a cross-sectional study on perceived factors of stress among medical students found "talking to friends" and "talking to parents/relatives" as perceived coping mechanisms by the responding students¹². In another study regarding factors associated with stress among nursing students (Sharma S, Kaur A, 2011), 49% respondents mentioned "lack of close and intimate friend" as an important stress factor¹³. A study in UK compared effect of graduate studies on level of social exclusion among medical and economic students

⁴(Blakey H et al., 2008). Medical students were found having significantly decreased interaction with their close friends and housemates than economics students, and felt separated from the rest of university life. Besides sustained interaction with friends and families, the value of positive interaction in relation to learning from peers, clinicians and patients can also increase students' sense of accomplishment and their quality of life¹⁴ (Marcus H et al., 2010)

A significant finding of our study was the lack of participation of majority of study students in sports activities which they also attributed to studying in the medical college. Literature on relationship between participating in sports activities and academic performance of medical students was not found. A cross-sectional study involving eight thousand schoolchildren found that academic ratings were significantly correlated with the level of physical activity¹⁵ (Dwyer T et al, 2001). In a review of 43 articles, positive associations were found between physical activity and academic achievement, academic behavior, and cognitive skills and attitudes¹⁶ (Centers for Disease Control and Prevention, 2010)

Among various perceived factors which prevented our study students from meeting their family and friends, and participating in sports activity, the most striking was the hectic study schedule (referred as 'heavy workload' in this study). The heavy workload and examinations have been reported in several studies as the most significant causes of stress among medical students. The strongest predictor of well-being was academic stress mainly comprising of large workload, and the academically stressful and competitive environment of medical school. These results show that students who appraise their workload as stressful also report lower levels of well-being¹⁷. (Rogers M E (2012) A study in Saudi Arabia (Abdulrahman K B A, 2007) found that around 90% responding students of a medical school mentioned heavy workload (high number of lectures) as the major factor of reduced academic achievement¹⁸. Heavy workload, besides affecting academic performance has been reported to lead to very serious consequences even suicidal tendencies. A renowned medical institution in Pakistan has experienced a series of suicides by undergraduate medical students in last two decades. Four medical students committed suicides since 1991. Lack of social support system and heavy study load have been reported as underlying reasons¹⁹ (The Express Tribune, 2010).

There are limitations to this study, which are inherent in the methods used. Besides high influence of subjectivity of collected data due to perceived responses, there is an issue of generalizability as our study participants were selected from one medical college. In order to increase external validity

(Generalizability), inclusion of other medical colleges is needed.

CONCLUSION

A large proportion of study participants correlated studying in medical institution with the reduction in their social support system. The findings may not add to existing knowledge but provide an important aspect of attitude of newly enrolled medical students, which may affect their future professionalism. Findings of this study have broader implications for Pakistan where mushrooming of new medical institutions across the country is notable. Our findings suggest that medical institutions, particularly the newly established ones in Pakistan should review their situation with their faculty and students to assess the design and content of curriculum, teaching/learning strategies, and the overall schedule in order to render these adequately flexible and more facilitating of an effective and motivating teaching/learning environment. Medical institutions should be aware of the issues explored in our study while planning their curricula and educational programs. Prospective medical students should also be informed what social consequences they can face while studying in the medical college/university. On the other hand, medical colleges/universities should encourage their students to try to achieve a balance between study work and their social lives, and find feasible options for healthy coping strategies and socialization.

REFERENCES

1. Solanky P, Desai B, Kavishwar A, Kantharia S. Study of Psychological Stress among Undergraduate Medical Students of Government Medical College, Surat. *Int J Med Sci Publ Health* 2012; 1(2): 38-42.
2. Welsh A. Considering the Student Perspective: Factors that Undergraduates Perceive as Influential to their Academic Performance in Science. Carl Wieman Sci Educ Initiative 2010. Accessed at www.cwsei.ubc.ca.
3. Khodarahimi S, Hashim IHM, Mohd-Zaharim N. Perceived Stress, Positive-Negative Emotions, Personal Values and Perceived Social Support in Malaysian Undergraduate Students. *Int J Psychol Behavioral Sci* 2012;2(1):1-8.
4. Blakey H, Blanshard E, Cole H, Leslie F, Sen R. Are medical students socially exclusive? A comparison with economics students. *Med Educ* 2008;42(11):1088-91.
5. Sidhu JK. Effect of Stress on Medical Students. *Int J Sci Med Educ* 2007;1 (1):52-53.
6. Palmgren PJ, Chandratilake M. Perception of Educational Environment Among Undergraduate Students in a Chiropractic Training Institution. *The J Chirop Educ* 2011; 25(2): 151-163.
7. Lee J, Graham AV. Students' perception of medical school stress and their evaluation of a wellness elective. *Med Educ* 2001;35(7):652-9.
8. Aghamolaei T, Fazel I. Medical students' perceptions of the educational environment at an Iranian Medical Sciences University. *BMC Med Edu* 2010;10:87. accessed at <http://www.biomedcentral.com/1472-6920/10/87>
9. Unnikrishnan B, Rekha P, Mithra P, Kumar N, Reshmi B. Perceptions of Medical Students about their Educational Environment in Community Medicine in a Medical College of Coastal Karnataka. *Ind J Comm Med* 2012;37(2):130-132.
10. Lai NM, Nalliah S, Jutti RC, Hla YY, Lim VKE. The Educational Environment and Selfperceived Clinical Competence of Senior Medical Students in a Malaysian Medical School. *Edu Health* 2009;22 (2):1-15.
11. Nahar N, Talukder HK, Khan MTH, Mohammad S, Nargis T. Students' Perception of Educational Environment of Medical Colleges in Bangladesh. *BSMMU J* 2010;3(2):97-102.
12. Mane Abhay B, Krishnakumar MK, Niranjan Paul C, Hiremath Shashidhar G. Differences In Perceived Stress and Its Correlates Among Students In Professional Courses. *J Clin Diag Res* 2011 (Suppl-1;-5(6):1228-1233.
13. Sharma S, Kaur A. Factors associated with stress among nursing students. *Nurs Midwif Res J* 2011; 7(1):12-21.
14. Marcus H, Christian H, Yipin Z, Lain D. Quality of life and motivation to learn: A study of medical students. *Issues in Educ Res* 2010;20(3):244-256.
15. Dwyer T, Sallis JF, Blizzard L, Lazarus R, Dean K. Relation of academic performance to physical activity and fitness in children. *Pediatr Exer Sci* 2001; 13: 225-237.
16. Centers for Disease Control and Prevention. The Association Between School-Based Physical Activity, Including Physical Education, and Academic Performance. Centers for Disease Control and Prevention. U.S. Department of Health and Human Services, Atlanta, GA: U.S. Department of Health and Human Services, July 2010. Accessed at www.cdc.gov/healthyyouth/health_and_academics/.../pa-pe_paper.pdf
17. Rogers ME, Creed PA, Searle J. Person and environmental factors associated with well-being in medical students. Personality and individual differences 2012;52(4):472-477.
18. Abdulrahman KAB. Factors influencing academic achievement of medical students in the basic medical sciences at a conventional College of Medicine, College of Medicine. King Saud University, Riyadh. Kingdom of Saudi Arabia, 2007: Accessed at <http://faculty.ksu.edu.sa/11489/Documents/Download%2014.pdf>.
19. The Express Tribune. He was meant to save lives, but took his own. April 17, 2010. Accessed at <http://tribune.com.pk/story/7339/he-was-meant-to-save-lives-but-took-his-own/>