HEALTH AS AN ASPECT OF QUALITY OF LIFE OF UNIVERSITY STUDENTS

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Abstract: *This study aims to determine the relation between the perception of study-related stress at university and students' awareness of quality of life. Quality of life was evaluated using the SEIQoL method (Schedule for the Evaluation of Individual Quality of Life). The method does not pre-define criteria, but instead draws on respondents' personal views of what they consider to be important in their own lives. Among the values mentioned, particular attention was devoted to the significance attributed by university students to health. Study-related stress was evaluated using a questionnaire developed by D. J. Abramis, which uses scales of 4 – 7 ranks to determine respondents' stress levels and to evaluate their consequences in a standard week of study during the semester. Students' social integration was determined using J. A. Blumenthal's Perceived Social Support Scale (PSSS).*

Key words: *health, quality of life, hardiness, social support*

Introduction

The school year 2007-8 has seen the implementation of a number of changes to primary education in the Czech Republic, based around the idea of improving the interrelatedness of education and practical applications. Schools have been given a considerable degree of autonomy to create their own curricula. Teachers can now influence not just the form, but above all the content of their lessons. However, these changes have also given teachers more responsibility over the outcomes of their work.

The basic principles underlying this new conception of education are set out in the Framework Educational Programme. This national document defines nine 'key areas' of education. Apart from language teaching and mathematics, all of these areas consist of several thematically related subjects. The creation of broader content-based units, each leading to specific practical knowledge and skills, places new demands on the university training of future teachers. In response to these demands, some faculties of education are launching new degree subjects – such as Education for Health, which is designed to cover the subject matter of the Framework document's key area 'People and Health'.

Research questions and methodology

The design of the Bachelor degree in Education for Health and the follow-up Master's degree in Teaching Education for Health at Primary Schools led to three main questions: the place occupied in teacher training students' value systems by the concept of health, which other values and goals these future teachers consider important, and how these values are connected with health care.

The aim of this study was to determine the relationship between university students' perception of study-related stress, their social integration into the new university environment, and their quality of life.

"Quality of life is defined with regard to the individual's satisfaction with achieving goals determining the direction of his/her life. These life-directional goals are evaluated according to a hierarchy of values (the spiritual aspect). This hierarchy concerns goals towards which the individual's life efforts are directed." (J. Křivohlavý 2001, p. 40)

Students' quality of life was evaluated using the SEIQoL method (Schedule for the Evaluation of Individual Quality of Life – J. Křivohlavý 2001, p. 243), which does not pre-define criteria, but instead draws on respondents' personal views of what they consider to be important in their own lives. Respondents are asked to list five life goals that they consider important, and to evaluate their level of satisfaction with their achievement of these goals in percentage terms (0 % - 100 %). The next step is the respondents' judgement of the relative importance to them of each of the five goals, with the total set of five goals representing 100 %. This allows a calculation to made expressing respondents' positioning on a scale measuring their overall satisfaction with their own lives (QLG).

University study-related stress was evaluated using a questionnaire by D. J. Abramis, which uses scales of 4 – 7 ranks to determine the level of stressors: role of uncertainty, internal conflict, external conflict, depression, anxiety, anger, technical performance, social performance, and study-related stress. The second test of study-related stress was the hardiness questionnaire (C. Kolbasa), which is based around scales of control – lack of control, identification – alienation, and challenge – threat. The social integration of the students was determined on the basis of J. A. Blumenthal's Perceived Social Support Scale (PSSS).

Data set, results of research, discussion

The data set consisted of teacher training students from the Faculty of Education, University of Ostrava, Czech Republic, and students of Social Pathology from the Faculty of Arts and Sciences, Silesian University, Opava, Czech Republic. The basic data is contained in Table 1.

Table 1: Description of data set

Faculty	Number	Male	Female	Age
Ostrava	108	13	95	19 – 23
Opava	68	20	48	20 – 26

The quality of life measured using the SEIQoL method shows a positive correlation with the factor of quality of life measured using the QLG graphic scale in both groups of respondents: the first group +0.348, the second group +0.384. It was here that the closest positive relationship was found. The quality of life of the first group of students as evaluated using the graphic scale shows a negative correlation with the role of uncertainty –0.3668, anxiety –0.6687, depression –0.7050, and overall study-related stress –0.7657. The SEIQoL value shows a negative correlation with external conflict – 0.219 and anxiety –2.217. In the second group of students, the SEIQoL value shows a positive correlation with support from friends +0.249 and with the hardiness stress factors challenge – threat +0.243.

The hierarchy of life goals measured by the SEIQoL method are shown in the tables and graphs below.

Table 2: Preferred values of teacher training students

Value	2. N 108	3. ranking	4. % of 108	5. evaluation of 100 %	6. ranking	7. satisfaction in %	8. ranking
Health	84	1	77.8	27.25	2	78.63	2
Family	77	2	71.3	25.88	4	74.17	3
Education	68	3	63.0	17.63	5	69.67	5
Partner	66	4	61.1	26.45	3	73.00	4
Friends	58	5	53.7	15.38	7	79.47	1
Job	45	6	41.7	14.04	8	53.29	10
Life com-fort	26	7	24.1	15.42	6	62.46	7
Material comfort	24	8	22.2	9.17	10	54.71	9
Freedom	19	9	19.6	10.37	9	56.00	8
Religious faith	12	10	11.1	36.25	1	63.00	6

Graph to Table 2

1 – health, 2 – family, 3 – education, 4 – partner, 5 – friends, 6 – job,7 – life comfort,
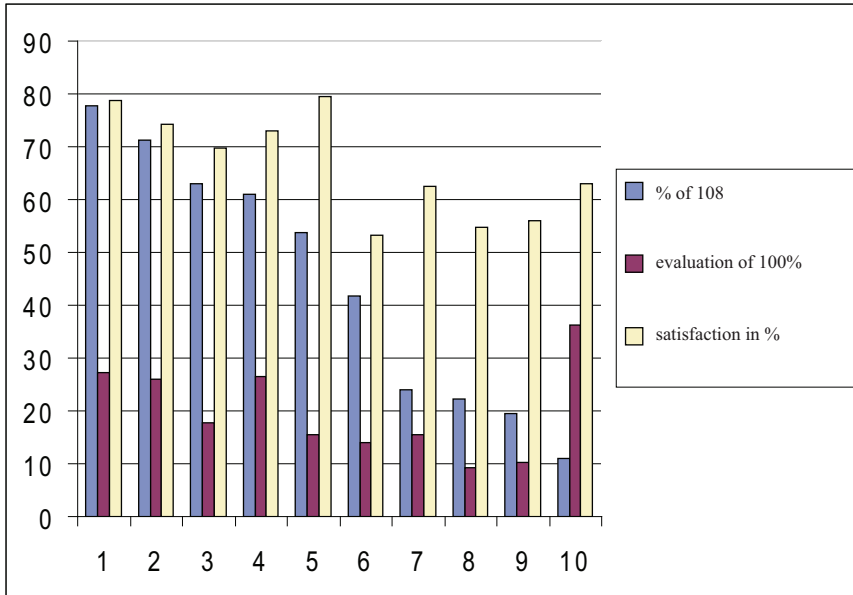8 – material comfort, 9 – freedom10 – religious faith

Table 3: Preferred values of social pathology students

Value	2. N 68	3. ranking	4. % of 68	5. evaluation of 100 %	6. ranking	7. satisfaction in %	8. ranking
Family	58	1	85.3	25.46	4	63.07	8
Friendship	40	2	58.8	15.87	8	75.07	1
Love	38	3	55.9	24.48	5	65.72	6
Job	37	4	54.4	15.00	9	38.24	12
Health	35	5	51.5	30.40	3	69.37	3
Education	31	6	45.6	18.37	6	66.29	4
Life comfort	17	7	25.0	16.00	7	64.41	7
Financial comfort	13	8	19.1	8.07	12	57.50	10
Hobbies	12	9	17.6	11.17	10	60.42	9
Sport	10	10	14.7	8.50	11	66.00	5
Religious faith	7	11	10.3	40.00	1	70.71	2
Helping others	5	12	7.4	31.00	2	45.42	11

Graph to Table 3
1 – family, 2 – friendship, 3 – love, 4 – job, 5 – health, 6 – education, 7 – life comfort, 8 – financial comfort, 9 – hobbies,10 – sport, 11 – religious faith, 12 – helping others
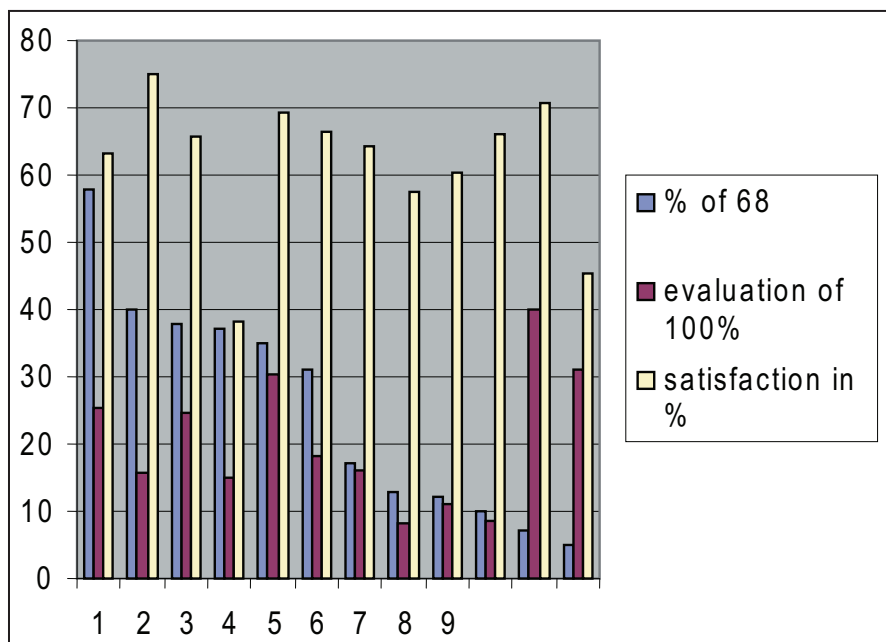
The values preferred by at least 5 respondents were subjected to a basic statistical frequency analysis (2. – absolute frequency, 3. – ranking according to absolute frequency, 4. – relative frequency, 5. – calculation of importance of value, i.e. evaluation by respondent as a share of 100 %, 6. – ranking according to importance of value, 7. – degree of satisfaction with achievement of value, i.e. degree of satisfaction in %, 8. – ranking according to degree of satisfaction).

Out of the 10 values preferred by teacher training students, health is ranked first or second. Most students list health among their important life goals, and it can be considered the most important value. The overall ranking of values (goals) shows characteristic features of this age group, for whom education – i.e. training for a profession – is considered more important than employment. The overall structure of values shows strong ties to the social environment, family and friends. In addition to frequency, the degree of importance is also of interest. Respondents citing religious faith as a key value attach a high degree of importance to this value, even though its absolute frequency in both sets of respondents is only just over 10 % of respondents.

The value profile of social pathology students shows the same structure, but demonstrates a different ranking of preferences and different degrees of importance attached to the choices. Health occupies a firm position among the top three values. The importance of spiritual values – connected with religious faith – is also the same. The

greater variability of the given values may be influenced by the more advanced age of this group of students, their different choice of degree subject, and also the higher number of male respondents in the social pathology group.

The results show a considerable degree of similarity between the two groups. The priority goals of the students are health, family, and partners. The main professional values are harmony and mutual interrelationships, which create a positive psycho-social climate for the development of individuals' health. This aspect of the research was also confirmed by the calculation of the correlation coefficient between current satisfaction QLC and the quality of life measured using SEIQoL. In both groups, the SEIQoL value shows significant positive correlation with QLG (for teacher training students 0.348, for social pathology students 0.384).

We are aware that the data presented here represent merely an initial probe into the issues involved. Nevertheless, the SEIQoL method offers a basis for qualitative analysis and creates conditions allowing for the collection of information concerning the value orientation of the tested populations. It can be used to determine what the particular population considers important. The results of this study indicate that health is valued very highly by students training for the teaching profession. These results are similar to those obtained by authors investigating the evaluation of teachers' health or quality of life, or personal predispositions to satisfaction (Blatný, M., Osecká, L., Macek, P., 1998; Mareš, J., 2005; Paulík, K., 2004; Vašina, B., 2004; Řehulka, E., 2003; Mužík, L., 2003).

Conclusion

Schools play an important role – alongside the family – in promoting and developing health, primarily through the quality of the curriculum in the key area 'People and Health'. In order to develop teaching of this key area at schools, it is important to train specialists in education for health. This academic year, the Faculty of Education at the University of Ostrava launched a programme to train teachers able to actively develop physical, mental, social and spiritual health. The Faculty now has two accredited degree programmes designed to achieve this goal.

The study presented here utilized the SEIQoL method and graphic scales of QLG quality of life to investigate university students. The authors also used a questionnaire on study-related stress in an attempt to determine relationships between the role of uncertainty and conflict roles as possible sources of stress among university students, as well as determining the effects of stress that can be diagnosed via the above-mentioned questionnaire. It appears that quality of life as measured via SEIQoL does not reduce the subjective level of stress, but mobilizes forces to cope with the stress. This is indicated by the significant correlation with the sub-factor 'challenge – threat' from the hardiness questionnaire – which can be interpreted as a situation in which higher stress generates the challenge to overcome that stress, without reducing quality of life.

It is our opinion that the SEIQoL method captures the most permanent, 'core' dimension of quality of life. It appears that the more temporary aspects of quality of life – including the satisfaction or non-satisfaction of current needs – are better represented by the graphic scale. We are aware that the data presented here suggest this conclusion,

but do not prove it. This research should be seen as a probe into the issues involved, which will be investigated more thoroughly in future. The results presented here should be viewed as a positive reflection on the university student population – though with the caveat that no firm generalization can be extrapolated from the limited data collected for the purposes of this study.

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TÉMA ZDRAVÍ JAKO ASPEKT KVALITY ŽIVOTA UNIVERZITNÍCH STUDENTŮ

Souhrn: Ve studii jsme se pokusili postihnout vztah mezi vnímáním zátěže studia na vysoké škole a uvědomováním si kvality života. Kvalitu života jsme ověřovali metodou SEIQoL (Schedule for the Evaluation of Individual Quality of Life). Metoda neklade předem kritéria, vychází z osobních představ respondenta o tom, co považuje ve svém životě za důležité. Mezi uvedenými hodnotami jsme se soustředili na významnost, kterou přikládají vysokoškolští studenti zdraví. Studijní zátěž jsme sledovali použitím dotazníku D. J. Abramise, který pomocí 4 – 7 stupňových škál hodnotí zátěž respondentů a její důsledky v běžném týdnu během studijního období. Sociální integraci studenta jsme zjišťovali Škálou sociální opory PSSS J. A. Blumenthala.

Klíčová slova: zdraví, kvalita života, zátěž, sociální opora