

How Happy Are the MBBS Students? - An Observational Study at a Premiere Government Medical College of Rajasthan India

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Abstract

Background: Being happy from inside is the utmost necessity to be healthy and to perform good, professionally as well as in personal life. Adolescent age group and MBBS degree course, are the periods where people are less happy. The well-being of medical students is crucial aspect of their academic success and future performance.

The aim of the present study was to assess the level of happiness and to describe reasons for happiness/unhappiness among medical students studying at premier government medical college and hospital Jaipur, Rajasthan India.

Material & Methods: This institutional based descriptive observational study was carried out on medical students of admission batch 2023, of SMS medical college Jaipur Rajasthan. The Oxford happiness questionnaire was used for happiness assessment. Data was collected using google form. Descriptive statistics and non-parametric test were used for analysis of Likert scale.

Observations: Two third of the study population (62%) were happy. Around half (44.5%) of them spend time with family and friends to stay happy. The reasons for unhappiness stated by unhappy students were academic pressure (35%), followed by staying indoors and isolating themselves, unhealthy behaviour, focusing on negative past and future events.

Conclusion: Overall medical students were found to be happy. Spending time with family and friends was an important factor for staying happy. The major reason for unhappiness was academic pressure followed by staying indoor and unhealthy behaviour.

Keywords: Happiness, Medical students, Government Medical College, Jaipur

Introduction:

The United Nations has recognized the pursuit of happiness as an important human goal. Happiness is considered an important part of quality of life and is above all the wealth¹ and therefore have been the ‘m

ost attractive area recently for researchers to work upon.

Happiness is defined as the combination of positive affect, lack of negative affect and life satisfaction^{2,3}. Happy people present four consistent traits: self-esteem, optimism, sense of self-control, and extroversion. Being happy from inside is the utmost necessity to be healthy and to perform good, professionally as well as in personal life. Increased happiness can be a health promotion strategy that is executed in different societies. Happiness is taken into consideration as a factor for the prevention of diseases.

Developing countries face pressing challenges and there is very less focus on happiness of individuals.⁴ Medical students face a unique set of challenges that can impact their mental health and well-being. The demands of medical education, including rigorous academic requirements, clinical rotations and high stakes exams can lead to significant stress, burnout and depression. Despite these challenges, happiness and well-being are essential for medical students.

Age, gender, education, occupation, money, marital status, and relationship with others have all been demonstrated to have an impact positive emotions and happiness levels in various researches.⁵⁻¹⁰ Adolescent age group may experience lower happiness due to increased emotional sensitivity and risk-taking tendencies inherent to this developmental stage. Doctors and nurses experience high levels of occupational stress as a result of their daily exposure to patient's pain and suffering, severe workloads, and bad working conditions.¹¹

Educational achievements are a priority of students as well as their parents, moreover it is overvalued in the current scenario of India and Worldwide. In order to achieve educational goals, other activities supportive of a person's development and for the sense of fulfilment are left way behind. Over community, talks of educational achievements are more and we rarely discuss happiness in families as well as in communities. A significant positive relationship between happiness and academic achievement was found.¹² Level of physical activity, good relation with friends/family, absence of stress in past 6 months, own choice of course was also significantly associated with happiness.¹³ A happy person is more productive for a family, community and country irrespective of the level of other achievements. Sawai Man Singh Medical College and Hospital being the apex government medical institute of Rajasthan and to enter, get admission and to study in this college is a big academic achievement. Therefore, we wish to assess the level of happiness among the medical students of this college, who have already achieved their goals in career.

Objectives:

To assess the level of happiness using Oxford Happiness questionnaire and to describe the reasons for happiness and unhappiness as stated by first year MBBS students of SMS medical college and Hospital, Jaipur Rajasthan India.

Materials and methods:

Type of study - Institute based descriptive- observational study.

Place of the study: study was carried out at Sawai Man Singh medical College and Hospital, Jaipur Rajasthan, India.

Study universe: the study universe comprises undergraduate students of SMS medical college, Jaipur.

Sample size - All 250 students of first year MBBS course studying in SMS medical college who gave consent to participate in this study. Incompletely or partially filled forms were excluded.

Study tool - Oxford Happiness Questionnaire was used to assess the level of happiness. This is a validated widely used standardized questionnaire for assessment of happiness. It has 29 questions with 6 options varying from strongly disagree to strongly agree.

Data collection - A Google form for the questionnaire was generated in English and the link of this was shared in batch WhatsApp group with a request to fill the form, of which only 15 students responded. After a week’s interval the link was shared again for the students who have not completed. At this time around 50 students attempted to fill the form. A list of names of students with their mail I’d was procured from academic section with the permission of academic in-charge and the students who have not participated even after 15 days of interval of sharing were emailed, requesting them to participate and waited for 1 more week for their response. By this time 70 more students filled the form. Further, non-responders were contacted personally with a request to fill the form, to reduce the non-responder rate. By the end, total of 209 students responded. Partially filled forms were excluded from the study.

Scores are given accordingly to each question. A total of 12 questions out of 29 were scored reversely. The total sum of scores ranges from 6 to 174. The total score then obtained was divided by 29 to arrive at the final score/global happiness score which ranged from 1 to 6. The final score was categorized as: 1-2: “Not happy,” 2-3: “Somewhat unhappy,” 3-4: “not probably happy or unhappy,” 4: “somewhat happy,” 4-5: “rather happy/pretty happy,” 5-6: “very happy,” and 6: “too happy.” Higher the scores, higher is the level of happiness. The score of <4 was taken as the unhappy category and ≥4 as the happy category.

Statistical analysis – Data was entered on excel sheet. Continuous data were summarized in form of mean and standard deviation. Count data were expressed in form of proportions. Tables and graphs were used for clarity and better representation of data. Non parametric test was used for analysis of Likert scale.

Observations and results:

Out of 250 students, 209 responded, with 182 meeting the inclusion criteria. The sample consisted of 60% boys(n=109) and 40% girls(n=73). Notably, 62% of the study population scored 4 or above on the happiness scale, indicating they fell into the "happy group," and around 59% of the total students were “pretty to very happy”.

A notable observation was the female predominance of happiness, with 70% of girls reporting happiness compared to 57% of boys. However, when applying the chi-square test to examine the association between gender and happiness status, the relationship was found to be statistically insignificant. This suggests that while there was an observed difference in happiness levels between boys and girls, it may not be a significant predictor of happiness in this study population.

Table 1: Status of happiness among medical students.

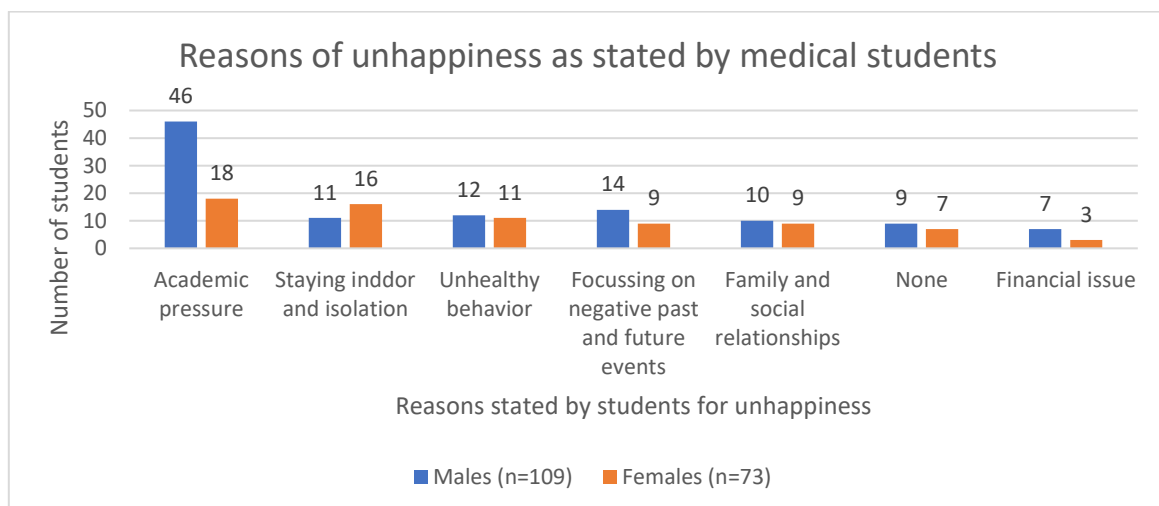
Score	Status	Boys(n=109)	Girls(n=73)	Total(n=182)
1-2	Not happy	0	0	0
2.1-3	Somewhat unhappy	8(7.3%)	3(4%)	11(6%)
3.1-3.9	Neutral	39(35.7%)	19(26%)	58(31.8%)
=4	Moderately/ somewhat happy	2(1.8%)	3(4.1%)	5(2.7%)

4.1-5	Pretty happy	48(44%)	37(50.6%)	85(46.7%)
5.1-6	Very happy	12(11%)	11(15%)	23(12.6%)

The reasons for unhappiness among students were varied, with academic pressure being the most significant contributor, affecting 35% of the population. Staying indoors and isolating themselves was another major reason, cited by 14.8% of the students. Additionally, 12.7% of the students attributed their unhappiness to unhealthy behaviours, while an equal percentage (12.7%) reported dwelling on negative past and future events. Family and social relationship issues were also a concern for 10.4% of the students. Financial issues were relatively rare, reported by only one participant. Notably, 8.7% of the students reported having no reasons for unhappiness, suggesting a positive outlook. These findings highlight the need to address academic pressure and social isolation to promote students' mental well-being.

Table 2: Reasons for unhappiness as stated by medical students.

Reason for unhappiness	Males(n=109)	Females (n=73)	Total count(n=182)
Academic pressure	46(42.2%)	18(24.6%)	64(35.16%)
Staying indoor and isolation	11(10%)	16(22%)	27(14.8%)
Unhealthy behaviour	12(11%)	11(15%)	23(12.7%)
Focussing on negative past and future events	14(13%)	09(12.3%)	23(12.7%)
Family and social relationships	10(9.2%)	09(12.3%)	19(10.4%)
None	09 (8.2%)	07(9.6%)	16(8.7%)
Financial issue	07 (6.4%)	03(4.2%)	10(5.4%)



When asked about their daily habits for boosting happiness or improving their mood, the majority of respondents (45%) reported spending time with family and friends as their go-to activity. Additionally, 23.6% of students found solace in music and dance, while 21.4% engaged in games and physical activities to uplift their mood. Notably, only a single respondent reported using substances as a means to cope, highlighting a significant deviation from healthier coping mechanisms adopted by the majority.

Table 3: Activities in daily routine to stay happy.

Activities	Males (n=109)	Females(n=73)	Total count(n=182)
Spending time with family and friends	46(42.2%)	35(48%)	81(44.5%)
Music and dance	16(14.7%)	27(37%)	43(23.6%)
Games and physical activity	33(30.2%)	06(8.2%)	39(21.4%)
Other hobbies	13(12%)	05(6.8%)	18(9.8%)
Substance abuse	01(0.9%)	00	01(0.5%)



Table 4: Extreme responses of students on certain aspects of life on OHQ (n=182)

Question	Strongly disagree	Strongly agree
Life is good	8(4.4%)	70(38.4%)
World is not a good place	59(32.4%)	16(8.8%)
I laugh a lot	8(4.4%)	66(36.2%)
I am well satisfied about everything in my life	16(8.8%)	34(18.7%)
I don't think i look attractive	35(19.4%)	23(12.6%)
I don't find it easy to make decisions.	17(9.3%)	23(12.6%)

The responses to selected questions from the Oxford Happiness Questionnaire revealed interesting insights into the attitudes and perceptions of medical students. A significant proportion (38.4%) strongly agreed that "life is good," while only a small percentage (4.4%) strongly disagreed. Similarly, 36.2% of students reported laughing a lot, indicating a positive outlook, whereas 4.4% strongly disagreed. However, some students struggled with self-perception, with over 10% strongly agreeing that they don't find themselves attractive. A similar proportion also reported difficulty making decisions. Notably, less than 20% of students expressed satisfaction with all aspects of their life. Furthermore, around 9% of students strongly agreed that "the world is not a good place," highlighting a pessimistic view. These findings provide a nuanced understanding of the well-being and life satisfaction of medical students.

Discussion

Medical field is considered among one of the prestigious and enriching professions, it is stressful associated with various physical and mental stress.

From this study we observed that 62% of the medical students were falling in the happy group which is almost equals to the results obtained (61%) in the study done by Shivam Kamthan et al in meerut.¹⁴

From an online survey conducted in Bihar in the year 2021 to assess the level of happiness among medical students, it was found that only 39.6% of them were happy of which none were too happy. Although a greater percentage of students (62%) were happy among our study participants. This lower proportion in 2021 may be because of ongoing pandemic – COVID 19, as 73.5% of students were dealing with stressful conditions.¹⁵ It was also observed that almost double the percentage of students in Bihar were involved in some kind of physical activity. Little higher proportion of medical students being happy (70%) was observed by Surendra Kulkarni et al¹⁶ at a private medical college, Pune. Female students were slightly happier than male students, which is a similar finding with our study population.

A study conducted among 315 medical students of all academic year in Andaman and Nicobar Islands in the year 2022 showed a lower percentage of students being happy (42.5%). Also, no significant difference between gender and level of happiness was found which corresponds to our study findings.¹⁷

Kavichelvi K and M Justin observed that approximately 76% of nursing faculty in Lucknow, who scored 4 and above, fell into the 'happy' category—indicating a high prevalence of well-being among participants.¹⁸ The cause of this variation may be because of difference in age group as more than half of

the study participants were above 19 years of age and also due to academic pressure as stated by the medical students.

The mean total of the oxford happiness questionnaire of our study was 121 ± 21 (lowest 62 and highest 168), which was slightly higher than the study done by Azadeh Lesani et al¹⁹ among medical students of Qazvin university of medical sciences, Iran (114.59 ± 18.31 , min: 44 and max: 157).

Among 420 undergraduate students of medical college in western Maharashtra, around 67% were falling in the happy group. Female and young age students were found to be happier.²⁰ Mean happiness score was 4.28 ± 0.72 which is almost similar to our finding (4.17).

Another study conducted in AIIMS New Delhi in the year 2019-20 among nursing students,²¹ it was observed that 42.1% of the study population scored between 4-5 on the Likert scaling of happiness which is nearly about same (46%) from our study. And nearly half of the nursing students were falling in the happy group that is score 4 and above, which is lesser as compared to the results obtained in our study. This may be because the former study included students from all academic years. And also, academic year and choice of course showed significant association with the level of happiness.

Conclusion and recommendations

Overall medical students were happy. Spending time with family and friends was an important factor for staying happy. The major reasons for unhappiness were academic pressure followed by staying indoor and isolating themselves and unhealthy behaviour. Fortunately, substance abuse was not in the list of coping mechanism by the students.

Identifying all such factors helps governments perform necessary reforms to promote happiness in their societies. A better understanding of happiness among medical students can also have implications for patient care and overall healthcare system.

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