Original Article

Quality Of Life Among Students In University Of Science And Technology In Jordan

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Summary:

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Objective:

To assess the subjective rating of quality of life of college students in University Of Science And Technology in Jordan as a sample of healthy educated young population through applying the WHOQOL-BREF instrument as a field trial in Jordan and to compare the finding with similar previous study.

Methods

Three hundreds forms of Arabic version of the self-reporting questionnaire WHOQOL-BREF were distributed to students of third class attending the lecture halls in three colleges (college of Engineering, college of science, college of medicine) in the university campus in AL Ramtha–Jordan from the first of March to first of may 2007., with respect to university regulations, interested participants were only included in the study.

Results

The rate of response was 100%, the majority of the sample were of single healthy Jordanian nationals of comparable age and sex distribution. About 68.6 % of the students described their quality of life as good or very good while 30% as acceptable, or fair, the remaining 1.3% reported bad or very bad.

Regarding the mean scores distribution of the four domains there were no significant statistical differences between the demographic variables and type of academic discipline. This study findings showed a higher scoring than the previous one done In Iraq.

Conclusion

The overall psychological profile of college students in Jordan assessed by the WHOQOL-BREF is good manifested through their satisfaction with their life quality ,no important association with given variables was found ,The study revealed better reporting than the Iraqi study reflecting the cultural differences and environmental effects.

The investigator recommends re application of the same instrument on other population sample.

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Introduction:

The constitution of the World Health Organization defines health as "A state of complete physical, mental, and social well being not merely absence of disease..."It follows that the measurement of health &the effects of health care must include estimation of well-being and quality of life related to personal view. WHO defines quality of life as an individual's perception of their position in life in the context of the culture &value systems which they live in⁽¹⁾.

Quality of life has been defined as a broad –ranging concept affected in a complex way by such things as physical health ,psychological state ,level of independence ,social relationships and relationship with the environment⁽²⁾.

On this base the WHO responsible research team developed a project based on the work of a panel of consultants and investigators through 15 international field centers ,as a part of this international project ,a multilingual, multi-dimensional profile of across-cultural instrument was created as a generic tool for use on patients ,healthy individuals and cultural subgroups⁽³⁾.

The WHOQOL is there fore, an assessment of multi dimensional concept incorporating the individual's perception of health status, psychological status and other aspects of life. Quality of life is now a more valued assessment, not only in psychiatry but also in many other areas.

The subjective nature of quality of life allowed e researchers all over the world to use the WHO derived instrument, which was translated to almost 30 languages across cultures, proved credibility.

The parent WHOQOL-100 assessment has been undergoing development since 1991and the WHOQOL-BREF was derived in 1996 to be of more practical use being less time consuming. Translation and back translation to Arabic language and implementation of the WHOQOL-BRE took place in 2000⁽⁴⁾.

Although data regarding quality of life in Arab region are sparse interest in applying the same tool is growing.

Implementing this practical tool on a healthy population in Jordan call the attention to choose elective study sample ,that was fulfilled by the students of University of Science And Technology which is considered to be a prestigious academic institute in Mediterranean region embracing different colleges and scientific research bodies.

Methods

This study implemented the Arabic version of WHOQOL-BREF questionnaire which is derived from the primary WHOQOL-100 originally developed by the world health organization. It included 26-item consisting four domains: Domain 1 concerning with physical capacity, psychological ,social, relationships and environment, while two items cover the overall quality of life and general health profile^(2,4).

The University of Science and Technology in HKJ was Chosen as modern academic Arab community where multinationals students mostly Jordanian with significant number of Arab nationals who represent a sample of intelligent healthy young population.

The studied sample was recruited from the lecture halls in three colleges inside the University of Science and Technology campus located in Alramtha–Jordan during the academic teaching year 2006 starting from first of March to first of May according to lecturers schedules and convenience of both students and staff was negotiated.

Formal and ethical clearance had been obtained by the academic authority. Oral consent of the interested participants was taken; students who refuse to contribute were excluded.

Explanation about the purpose and study methodology was offered to the students. Third year classes were chosen among three Colleges, College of Engineering ,College of Science, College of Medicine, to assure homogeneity of the studied sample regarding age ,sex ,intellectual back ground. The questioner forms were distributed to300 students (n=100, each) studying in the above three different colleges.

The participant students were asked to fill the questioner forms with no names to ensure confidentiality⁽⁵⁾.

Every enquiry about the aim and nature of the nature was fulfilled by the author personally.

The two separate general questions about subjective acceptance to quality of life and general ill health were scored at the start, followed by scoring to all other 24 questions focusing on the four domains covering the life facets qualities. Data collected included age, sex, and marital status, level of education, presence of physical or mental illnesses.

The investigator substituted the question about level of education with another question about the student's nationality for the reason of examining the cultural differences and the sample is of the same findings.

All collected forms were successfully completed by the participant students within 15-20 minutes in the class room following end of their lectures.

The Data was submitted to statistical analysis using mean score, analysis of the variance, t-test, chi-squared test and correlation coefficient were used to test for differences in the quality of life between the three groups classified by socio demographic variables and to test significance of any association.

General mean scores of this study were compared with the total mean scores of similar previous study done in Iraq 2001.

Results

The whole sample comprised 161(53.6%) male and 139 (46.3%) female students, mean age group was 20.4 years (standard deviation3.4).

Two students found to be married were 2 (0.6.6%), divorced, separated, or widowed

were nil (0%) the rest were singles 288 representing the vast majority 99.4%.

268 students were Jordanian nationals (89.33%) while 32 (9.33%)of the students were of other nationals as shown in (Table 1).As shown in Table (2) 222 students representing 74% of the sample viewed their general health as good or very good ,76 students 25.3% reported fair or accepted describing their general health, the remaining 2 students 0.62% admitted having chronic physical illnesses.

Regarding the response for the general question about subjective satisfaction with quality of life, approximately

23.3%(n=70) of the sample reported very good ,45.3%(n=136)had good quality of life ,30%(n=90)had fair or accepted quality of life the remaining.1% (n=3) described it as bad, 0.3 %(n=1) described it as very bad as summarized in Table (3). No statistical significant differences were found among the three studied groups.

Mean scores for each of the four domains of QOL among the three studied groups are summarized in (Table4).where the scores of domain 1 –about physical health is approximately equal 44.8 reflecting good physical capacity.

In Domain 2 which concerned with the psychological relationship, the mean scores were 35.6 indicating accepted finding again with no statistical significant differences with the type of academic discipline.

For Domain 3 (social relationship) students in College of Medicine scored 20.4 which is slightly lower than their collogues in other two colleges.

For Domain 4 (environment) the mean scores of the students in the three groups again was approximately similar 38.8 which reflect expected level of satisfaction with the environmental facilities with no statistical significant differences between the three colleges.

Figure 1 showed the comparison of the assessment of the quality of life in the three study groups where no marked association is found between each study group.

Figure 2 summarized the relative distribution of the four domains in the three groups which revealed high scoring reflecting a substantial psychological satisfaction with life quality.

Figure 3 summarized the comparison of the mean scores of this study with the mean scores of previous similar study done in Iraq 2001 on similar population sample of Iraqi college students which revealed significantly lower scores among the Iraqi group.

Discussion

The overall findings about subjective satisfaction of the College students with their life quality in Jordan are good.

Up to the knowledge of the investigator there was no report of quality of life applied on normal population in Jordan before, a need to conduct such a study called the attention of the author in order to examine the studied sample and to compare the findings with similar previous study.

University of science And Technology located in Al Ramtha represent a prestigious academic community involving many colleges and scientific institutes of different disciplines with students attending from all over Arab and non Arab countries which gave the chance to apply WHOQOL-BREF Arabic version among them being a sample of young, healthy, educated Arab population⁽⁶⁾.

Application of WHOQOL-BREF took place across cultures and proved to be reliable, convenient, and applicable to Arab communities.

The findings of this study revealed a homogenous distribution of sex, age, marital state and educational level.

The age of the students was comparable being all students of the third class of three scientific colleges.

As the number of females joining universities Jordan is increasing the gender distribution is almost even in the sample, sex discrimination was not observed. concerning the marital status, never married students formed relatively the whole studied sample 98.8% which was an expected finding being of middle to upper social class who prefer to post pond marriage after graduation and establishing their career lives, and this finding is consistent with the previous similar study done in other cultures⁽⁷⁾.

Physical health was very good for the whole studied sample which is an expected finding being young and physically fit when start applying to the university.

The first general question was designed to measure overall quality of life subjectively revealed that the majority of the sample admitted satisfaction with their life as good or fair and this may be explained by the fact that the chosen sample was healthy normal population with no apparent physical or psychological hardships and presume to be of middle to upper class knowing that college education in Jordan is self financed and considered to be high according to the general average population income.

The fact that Jordanian nationals scored better than others can be explained by the fact that Jordanian students living in their own culture with their families which provide the psychological support and emotional stability.

Regarding the mean scores of the four domains in the three studied groups there was no obvious association observed between the kind of discipline this fact may be explained by being all of homogenous scientific educational achievement ,the slight statistical difference in domain 3 (social relationship) among medical students may be explained by the fact that studying medicine demands time and efforts than other scientific discipline leaving smaller place for social activities The overall picture of the findings is that of good response to assessment of psychological contentment of the students in University of Science And Technology in Jordan which was not a surprising result as to be considered non problematic studied group in addition to the general atmosphere of social and political stability in the country $^{(8,9)}$.

The Iraqi study which was accomplished on comparable sample year 2001, gave lower mean scores than this study which can be explained by the marked difference between the two studied groups regarding environmental facilities, impending apprehension of war and violence and the hardships of economical sanction which was imposed on Iraq with its devastating social and psychological effects⁽¹⁰⁾.

Recommendation

Future studies in different Arab countries are called in order to investigate the effect of cultural and environmental variables on the people attitudes towards their life quality⁽¹¹⁾.

Applying the same instrument on other normal population sample in Jordan of different demographic variables.

The author believes that collaborative efforts are needed to establish a data base concerning QOL researches in the countries of the region.

Variable	College of Engineering	College of science	College of medicine	Total	%			
Males	68	45	48	161	56.5%			
Females	32	55	52	139	46.2%			
Marital Status								
Single	99	99	100	288	99%			
Married	1	1	0	2	0.6%			
Others	0	0	0	0	0			
Nationality								
Jordanian	90	92	86	26.8	89.3%			
Others	10	8	14	32	9.33%			

 Table (1)

 Socio-demographic data of the studied sample

Table (2)Student's view of their general health

View of health	No.	%
Good	222	74%
Very good		
Fair	76	25.3%
Bad	2	0.62%
Very bad		

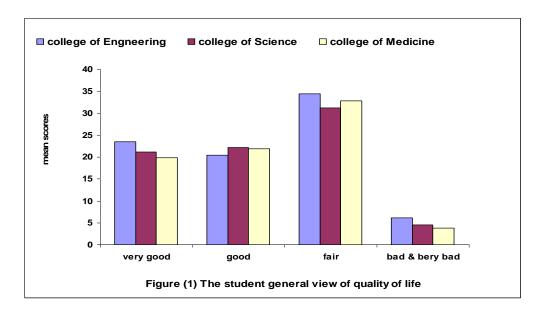
The students response about their satisfaction with quality of me					
View of health	No.	%			
Very good	70	23.3%			
Good	136	45.3%			
Fair	90	30%			
Bad or	3	1%			
Very bad	1	0.3%			

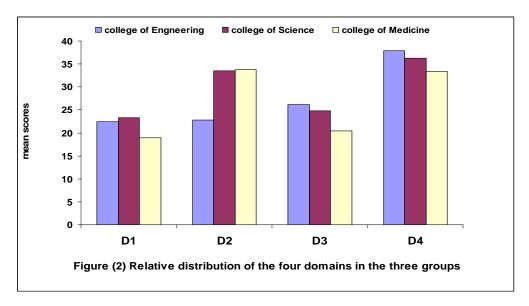
 Table (3)

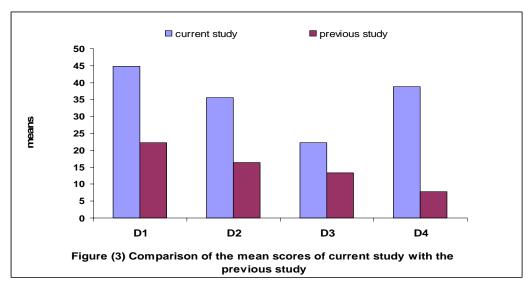
 The students response about their satisfaction with quality of life

Table (4)Mean scores of the four domain and QOL

Domains of quality of life	College of Engineering Mean	College of Science Mean	of Medicine Mean	X^2	P- value
1. Physical health	22.8	17.2	15.3	8.2	0.009
1. Physical health	22.8	17.2	15.5	8.2	0.009
2. Psychological	12.2	14.3	12	6.7	0.002
health					
3. Social	8.16	11.5	10.4	5.8	0.017
relationships					
4. Environment	12.8	9.4	8.9	9.03	0.008
Means of QOL	20.8	33.3	20.2	18.3	0.000







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References

1- 1-WHOQOL group. Study protocol for the World Health organization project to develop a Quality of life assessment instrument (WHOQOL).quality of life research, 2,153-159, 1993.

2- 2-Fletcher, A., Gore, S., Jones, D. Fitzpatric., spiegelhalt

er,d.and Cox,D. Quality of life measurement in health care. 11;Design ,analysis and interpretation. British medical journal, 305, 1145-1148, 1992.

3- 3-world Health organization –The WHOQOL group development of WHOQOL-BREF quality of life assessment. psychol-Med.May; 28(3)551-8,1998.

4- 4-Skevington-S.M ,Measuring quality of life Britain; Introducing The WHOQOL-100-jpsychosom-Research. Nov;47(5)449-59, 1999.

5- 5-Univversities of Jordan Guide, -21.RJ-University Of Science And Technology library ,2001. 6- 6-Al-HabeebT, Daradkeh TK. The quality of life of patients with schizophrenia 1 (Jordan-Saudi project); the reliability and validity of the modified version of schizophrenia quality of life scale (SQLS).Arab journal of psychiatry ,2003,14(1);10-18.

7- 7-Carr-hill RA.Assumption of QOL procedure. Social Science and Medicine, 29.469-477,1997.

8- Younis MS. Application of WHOQOL-BREF in Iraq. Journal Of Arab Board of Medical Specialization. vol.5.no,2003.

9- Younis MS, AlKaisi h., Vasudev K, Young A. Quality of Life among college Students in Iraq. QOL Newsletter Journal. vol (30,) 2003.

10- 10-AL-karkhi M. Depression and quality of Life. Iraqi Journal Of Community Medicine. 15(4).2002.

11- 11-Dickerson FB, Ringel NB, parent F.Subjective quality of life in out-patients with schizophrenia ;clinical and utilization correlates. Acta psychiatrica scandinavica, 98(2);124-7 1998.