A Survey on Evaluating the Relation between Self-esteem and Quality of Life in Students of Health School Affiliated to Mashhad University of Medical Sciences (2012)

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Abstract

Introduction: Self-esteem is one of the essential human needs regardless of the individual's social, scientific, and moral status. It has an exceptional role in one's mental health and personality balance. The purpose of the present study was to examine the relationship between self-esteem and quality of life in the students of Health School of Mashhad Medical Sciences University.

Methods and Materials: This study was a cross-sectional survey on 234 students of Health School of Mashhad Medical Sciences University in educational year of 2012-2013.Data were collected using WHO life quality questionnaire and Copper Smith self-esteem questionnaire. The collected data were analyzed through descriptive statistics methods (frequency, percentage, mean, and standard deviation), independent t-test and ANOVA using SPSS16 software.

Results: The findings showed that 61% of the students had a high quality of life with a good self-esteem indicating a statistically significant relation (p=.052).Among the five domains of quality of life; a significant relation was observed between social quality and self-esteem (p<0.05).

Conclusions: Students' quality of life increases as their self-esteem increases. Since self-esteem influences students' quality of life, performing child breeding educational sessions for promoting children self-esteem will help enhance children's self-esteem and ultimatelyimprove students' quality of life.

Keywords: Quality of life, student, self-esteem.

Introduction

Self-esteem is a sense of self-worth or personal value, which is derived from one's collection of thoughts, feelings, emotions, and experiences. It is the degree of approval, confirmation, and worthiness that an individual feels toward himself (1). Self-esteem is one of the essential human needs regardless of his social, scientific, and moral status (2). It has an exceptional role in one's mental health and personality balance. Low self-esteem causes imbalance in the person's life, and has negative effects on his creative functionality, and learning. High self-esteem makes a person functional and efficient, and produces effective social life and values (3), it induces a sense of trust, and helps one to adjust with himself to the environment and difficult situations (2). Researchers have shown that there is a relationship between students' personality characteristics like self-esteem and depression, and their quality of life (1, 4-6)

Quality of life includes life satisfaction, happiness, and prosperity, which are the aspects of human health (5). A person's feeling about his health is derived from the previous and current experiences in life and reflects the level of life satisfaction during the time (6). Quality of life is a new concept in social research and psychology. In the mid-twentieth century, besides economic, social and cultural developments in countries, development occurs more in sciences and technology; people gradually acquired more welfare and demanded a higher quality of life; therefore, lots of attention has been paid to quality of life in the twentieth century. In fact quality of life is an outline for all the health care goals which evaluates the effect of health on human life (1,5).

Marriage and Cummins (2004) found that self-esteem could be an appropriate predictor for quality of life in the students.

In addition, Kermode (2001) in his study on the relationship between quality of life, self-esteem, and health found that the students with a higher self-esteem had lower rates of absence in classes and they had higher quality of life compared with other students. Nilsson et al. in a study in 2006 found that people with low social resources had a lower quality of life(1). Healthy individuals have a higher self-esteem and generally adjust to their environmental condition more easily, in other words self-esteem helps people to choose their type of reaction (7).

Researches also have shown that marital status and health are related with life satisfaction. A high self-esteem is a strong predictor of life satisfaction (7), and training social skills increases self-esteem (8).The positive effects of social supports as modulators mediating anxiety are proven. It was shown that emotional health is associated with social support offered by schools (9). Jung (2001) and Masoudnia(2009) in their studies showed the relationship between a low self-esteem and high incidence of social anxiety(10-11).

Based on 2011 census, 23.4%ofIran's population is young, and therefore Iran is considered a young country. Many of these youth are university students, are prone to lose their self-esteem and health for various reasons including living away from family, specific condition of youth age, economical problems, and uncertain career outlook (12).

The studentship period is a challenging and critical period in a student's life. During this period, students, especially those in medical sciences, who are exposed to more stressful situation and need higher adaptation skills, should have proper mental health and higher self-esteem to ensure their success in their study and future career (13).Since quality of life, feeling happy, and life satisfaction are indictors of general health and mental health

(5), the present study aimed at investigating the relationship between self-esteem and quality of life among students at Health School in Mashhad University of Medical Sciences (MUMS).

Methods and Materials

In this cross sectional study,census method was used to investigate all the 234 students at the Health School of MUMS(at least for 3 months)in the educational year of 2012-2013.

The study tool consisted of three parts. The first part was demographic information with 7 questions.The second part was World Health OrganizationQuality of Life (WHO QOL), BREF questionnaire with 26 questions in 4 domains of physical (7questions), mental (6 questions), social (3 questions) and environmental (8questions) domain, and two separate questions focusing on overall QOL and general health (14).The 5-point Likert scale (very good, good, moderate, bad, and very bad from 5 to 1) was applied. We defined the 1-2.30 scores as weak, 2.31-3.65 average, and 3.66-5 as excellent quality of life. The third part was Copper Smith self-esteem questionnaire with 34 questions on the Likert scale (strongly agree, agree, moderate, disagree, and strongly disagree from 5 to 1), the scores 1-2.29 was defined weak, 2.30-3.67 average, and 3.68-5 for excellent status of self-esteem. The validity and reliability of the translated version of the quality of life questionnaire(12, 14)and self-esteemquestionnaire (13)are confirmed in the previous studies. The questionnaires were distributed amongst the students by one of the researcher (Z.N.) in the classes (response rate80%). Data was analyzed using descriptive statistics (frequency, percentage, mean, and standard deviation), *t*-test, and ANOVA, using SPSS 16.5 (SPSS Inc., Chicago, IL, USA) at a significance level of 0.05.

Results

Of the total 243 sample population, 145(76%) were female, 143 (75%) single and 103 (55%) lived in student dormitories. The field of the study of 34% of the students was Public Health and 1% majored in Health Education. Most of the participants (77%) were BSc students, 20% were associate students, and 1% were MSC students, of which 33% were in the 4[th]semester, 23% in the third, 18% in the second and 23% in the first. We did not find any significant relation between self-esteem and demographic characteristics including gender, marital status, residence, degree, study semester, field of study and ethnicity. No significant relation between quality of life in general and demographic information except for ethnicity (p=0.042) was considered (Table 2). In evaluating the relation between demographic characteristics and the 4 domains of quality of life, the significant relations were found in the followings: mental quality of life and gender (p=0.013), life satisfaction and semester (p=0.048), and environmental quality of life and semester (p=0.016).

Table1: The relation between self-esteem and quality of life with Chi₂ test

Domains of quality of life		Self-esteem						sig
		Weak		Average		Excellent		
		Number	Percent	Number	Percent	Number	Percent	
Physical	Weak	0	0%	4	44.4%	5	55.6%	.109
	Average	0	0%	71	63.4%	41	36.6%	
	Excellent	0	0%	33	48.5%	35	51.5%	
Mental	Weak	0	0%	3	75%	1	25%	.314
	Average	0	0%	86	59.3%	59	40.7%	
	Excellent	0	0%	19	47.5%	21	52.5%	
Environmental	Weak	0	0%	15	71.4%	6	28.6%	.292
	Average	0	0%	91	55.8%	72	44.2%	
	Excellent	0	0%	2	40.0%	3	60.0%	
Social	Weak	0	0%	7	77.8%	2	22.2%	.053
	Average	0	0%	78	60.9%	50	39.1%	
	Excellent	0	0%	23	44.2%	29	55.8%	
Life satisfaction	Weak	0	0%	5	62.5%	3	37.5%	.293
	Average	0	0%	36	65.5%	19	34.5%	
	Excellent	0	0%	67	53.2%	59	46.8%	
Overall quality of life	Weak	0	0%	4	66.7%	2	33.3%	.047
	Average	0	0%	90	61.2%	57	38.8%	
	Excellent	0	0%	14	38.9%	22	61.1%	

Table2: The relation between quality of life and ethnicity with Chi₂

Quality of life / Ethnicity		Weak	Average	Excellent	
Fars	Number	5	125	34	0.042
	Percent	83.3	85	94.4	
Kurdish	Number	0	8	0	
	Percent	0	5.4	0	
Luri	Number	0	1	0	
	Percent	0	7	0	
Turkish	Number	0	10	1	
	Percent	0	6.8	2.8	
Arab	Number	1	1	0	
	Percent	16.7	7	0	
Other	Number	0	2	1	
	Percent	0	1.4	2.8	

Discussion

The aim of the present cross-sectional study was to evaluate the relationship between self-esteem and quality of life in the students of Health College of MUMS. The results showed that a significant relation exists between self-esteem and quality of life; as self-esteem increases, student's quality of life increases as well. This result is similar to the results of many other studies in Iran and other countries (4-5, 14-16). A high self-esteem increases one's self-confidence, ability and capability, and sense of having a useful and valuable life. Studies have shown that self-esteem has positive influence on

quality of life in adults (9,17).Adolescents who have a positive feeling about themselves, have a higher quality of life, and are better able to handle their problems(18).Evaluating the mutual relationship between quality of life and self-esteem revealed that social factors have an effective role in this relation. Salehi's study demonstratedthe positive effect of social support on reducing anxiety, and the relationship between the students emotional health with the support offered by the schools(9).

We did not find any low self-esteem existing among the study population, which may be the result of their social status.There was nosignificant relationship between self-esteem and gender, which was consistent with Ghaderi's study(3). While Zaki in his study conducted in Isfahan University, stated that there was a significant difference in genders in favor of the females (5). This discrepancy may be the result of difference in gender distribution between the two studies. In Zaki's study the number of male and female participants was equal while in our study 76% of the participants were female. No significant relation was observed between self-esteem and students' marital status, which is consistent with another study in Shiraz(13). However, we did not find any significant association between self-esteem and the place of residence (student dormitory or elsewhere). While Zare's study showed a significant difference in this regard(13), the difference between thesetwo studies could be due to the diversity of students; Zare gatheredparticipants from 8 faculties of the Medical University while our participants were all from the Health Faculty.

Regarding the relationship between the domains of quality of life and demographic characteristics, it was observed that the mental quality of life had a meaningful relationship with gender, life satisfaction with study semester, and environmental quality of life with the semester.The overall quality of life did not have any significant relation with demographic characteristics including gender, marital status, type of residence, degree, field of study and semester, which were in agreement with Salehi's study results (9). We found a significant relation between quality of life and ethnicity. Mansorian found a significant relationship between quality of life and place of residence, but did not find any significant relation between quality of life and semester or field of study (12). In our study, we did not observe any significant relationship between quality of life and gender, which is consistent with Zaki's finding (5). The relationship between quality of life and marital status was not significant, but Kermode reported that married people had a higher quality of life compared to singles (16). In Kermode's study, participants were from all age groups (under 40 years old, 40-65 years, and over 65 years old) while our participants were all young students, which could justify the difference between the results of the two studies. Since in performing this study we were faced with a lack of cooperation from some participants, or some questions remained unanswered, a reduction in the sample size of the study can be considered one of our limitations. Conducting studies with a larger sample size and controlling confounding factors may overcome this limitation. Another limitation was that we focused on social aspects of quality of life, while it is a complex, multi-dimensional and wide concept that includes objective and subjective factors.

Conclusions

The results showed that a significant relation exist between self-esteem and quality of life; when self-esteem increases, student quality of life increase as well.Since self-esteem has

exceptional effects on students' quality of life, the role of parents' background/early teaching is essential in improving the quality of life in the future generation.Performing educational sessions for promoting children's self-esteem may improve the future generation's quality of life indexes.Our study sample consisted university students who have already experienced some achievements in their life (entering school), therefore before generalizing the results, it is recommended to perform a study with a larger and more general samples size.

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References

1-Ghasemizade A, Tabrizi H, Abedi M, Barzide O. [A comparative study of the relationship between quality of life and self-esteem, stress and social capital in children and Persian martyr]. Sci J New Approach Educ Res 2009;1(4):107-44. [In Persian]

2-SahebzamaniM, FesharakiM, Abdolahi Z. [The relationship between self-esteem and lifestyle in adolescent girls of public high school daily in Tehran]. Med Sci J Islamic Azad Univ 2010;20(1):45-51. [In Persian]

3-Ghaderi M, Batmani F, Ahmadi F.The relationship between moral characters (self-esteem, self-control and self-efficacy) with creativity staffs [Research Project]. Sanandaj: Azad University; 2012.

4-Theunissen NC, Kamp GA, Koopman HM, Zwinderman KA, Vogels T, Wit JM. Quality of life and self-esteem in children treatedfor idiopathic short stature. J Pediatrics 2002;140(5):507-15.

5-Zaki MA. [Quality of life and its relation to self-esteem among Isfahan University students boys and girls]. J Psychiatr Clin Psychol 2007;13(4):416-9.

6-Khaleghi Z. The relationship between contraceptive method and women's quality of life three months after the procedure referred to health centers of the city of Zanjan [Research Project]. Mashhad Med Sciences University; 2007.

7-Borna M, Sevari K. [The simple and multiple relationship between religious attitudes , mental health, life satisfaction and self-esteem and happiness]. New Findings Psychol2008;2(8):76-86. [In Persian]

8-Nazari I, Hosseinpour M. [The Effects of Social Skill on Anxiety And self-esteem among second gard girl's high school in baghmalek]. New Findings Psychol 2008;2(6):95-116.[In Persian]

9-Salehi T, Dehghan NN. [Anxiety-related quality of life and seeing the students of Tehran University dormitory]. Payesh J 2010;10(2):175-81.[In Persian]

10-Masoudnia E. [A survey relationship between Self-esteem and social anxiety among undergraduate students]. Clin Psychol Pers 2009;1(37):49-58. [In Persian]

11-de Jong PJ. Implicit self-esteem and social anxiety: differential self-favouring effects in high and low anxious individuals. Behav Res Ther 2002;40(5):501-8.

12-Mansorian M, Behnampour N, Kargar M, Rahimzade H. [Health-related quality of Gorgan University of Medical Sciences]. J Nurs 2006;3(2):16-20. [In Persian]

13-Zare N, Daneshpajooh F, Amini M, Razeghi M, Fallahzadeh M. [The Relationship between Self-esteem, General Health and Academic Achievement in Students of Shiraz University of Medical Sciences]. Iran J Med Educ 2007;7(1):59-66. [In Persian]

14-Asadi Sadeghi Azar I, Vasudeva P, Abdollahi A. Relationship between Quality of Life, Hardiness, Self-efficacy and Self-esteem amongst Employed and Unemployed Married Women in Zabol. Iran J Psychiatr 2013;1(3):104-11.

15-Dantas R, Motzer S, Ciol M. The relationship between quality of life, sense of coherence and self-esteem in persons after coronary artery bypass graft surgery. Int J Nurs Stud2002;39(7):745-55

16-Kermode S, MacLean D. A study of the relationship between quality of life, health and self-esteem. Aust J Adv Nurs 2001;19(2):33-40.

17-Marriage K, Cummins RA. Subjective quality of life and self-esteem in children:the role of primary and secondary control in coping with everyday stress. Soc Indicators Res 2004;66(1-2):107-22.

18-Heidari M, Alhani F, Kazemnejad A, Moezzi F. [The effect of empowerment model on quality of life of Diabetic adolescents]. Iran J Pediatr. 2012;17(1):87-94. [In Persian]